CELCIS Centre for excellence for Children's Care and Protection

coramVoice getting young voices heard

Your Life, Your Care:
The views of children in care on their wellbeing

The Bright Spots programme Scottish pilot



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Introduction

About this report

In this report, we bring together data from the first phase of the Bright Spots pilot in Scotland in 2022 and the second phase in 2024 to explore how children in care from the participating local authority areas felt about their lives at these points in time. Our findings build on much of what we already know about the positive and negative aspects of the lives of children in care in Scotland, and we do not seek to analyse change over time. The findings explore recognised aspects of the lives of children in care in depth and provide insights into other aspects of their experiences and feelings that are less well known and understood. We hope that corporate parents from all agencies will use our findings to continue to improve the services and support they provide to children in care, and that the evidence presented will be used to inform the ongoing process of policy development to improve support for children in care in Scotland. We make recommendations for corporate parents and policy makers, but it is important to acknowledge that the findings do not necessarily represent the position and views of all children in care in Scotland.

The Bright Spots Programme

Developed with and for children and young people with experience of care, the Bright Spots Programme provides local authorities with the opportunity to methodically collect the voices of their children in care from as young as the age of four to hear about how they feel and what is important to them, so that local agencies can listen to and act on what children have to say about their lives and experiences. This report brings together the voice and views of children from across the six local authority areas that have now participated in the Bright Spots Programme in Scotland.

Voice is one of five foundations on which The Promise of the Independent Care Review (2020a) was built. This pivotal report in Scotland asserts that children must be listened to and meaningfully involved in decision-making about their care, and that the data collected must be improved so that the voices of children and young people who experience care are properly represented and responded to. In Scotland, information is collected at a national level which tells us how many children and young people are in care, and what happens to children and young people as they move through the care system. This is valuable information, but our national data tells us very little about the experience of children and young people in care, or how they feel about their

lives. The Bright Spots programme was created to address a similar deficit in the data in England in 2013.

A partnership between Coram Voice, the leading national charity for the voice of children in care in England, and the University of Bristol and, subsequently the Rees Centre at the University of Oxford, developed the Bright Spots Your Life, Your Care surveys for children in care aged 4 to 17, with funding from the Hadley Trust. The Bright Spots Your Life, Your Care survey is strongly evidence-based: development of the surveys was led by Professor Julie Selwyn and involved literature reviews, consultation with practitioners and policy makers, and testing and piloting. The survey questions were co-produced with 140 children and young people with experience of care. These children and young people helped to develop a series of questions to capture what was important to them, and these questions became the Programme's indicators of wellbeing (Figure 2).

In 2017, the Bright Spots Your Life Beyond Care survey was developed specifically for and with young people and adults who had been in care, and was originally funded by Coram-i, through the UK Government's Department for Education Social Care Innovation Fund, with further development and roll-out funded by the Hadley Trust in England and Wales. The survey includes questions which enable comparison with what children in care share in their responses to the Your Life, Your Care survey, and includes additional questions that specifically focus on the experience of leaving care.

All six local authority areas participating in Scotland carried out both the Your Life, Your Care survey and the Your Life Beyond Care survey. The findings of the Your Life Beyond Care survey are explored in a companion report (Anderson et al, 2026).

Coram Voice has supported local authorities to successfully deliver the Bright Spots Programme in England and Wales since 2015, and CELCIS, the Centre for Excellence for Children's Care and Protection, has partnered with Coram Voice to pilot the Bright Spots Programme in Scotland since 2021.

The surveys were designed to focus primarily on the 'subjective wellbeing' of children in care. Coram Voice defines in this context that subjective wellbeing refers to children's own evaluations of how they feel about their lives. There are questions in the surveys about 'affect', for example, how happy a child feels now; cognitive judgements, for example, evaluations of relationships; and the child's feelings about their inner world, that is, life having meaning.

The responses to the surveys help identify the areas where children appear to be flourishing and where things could be improved and provide an evidence base of children's experience and wellbeing to inform service improvements. The breadth of coverage allows local authorities to hear from a wide range of children in care, and to reach beyond children and young people already involved in other participation activities the local authorities might be undertaking. By listening to, and, most importantly, acting on what children have said, the programme has led to innovative changes in England, Wales and now Scotland too, and many examples of positive practice can be found in the Bright Spots Resource Library: https://coramvoice.org.uk/resource-library/brightspots.

Piloting Bright Spots in Scotland

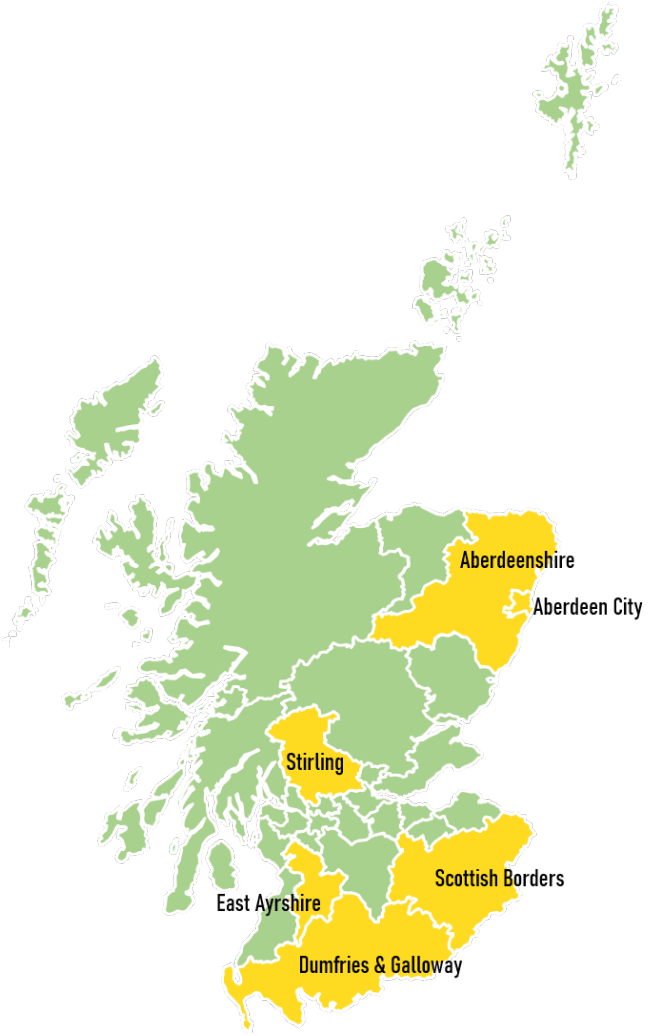


Figure 1. The six local authority areas that participated in Bright Spots in Scotland

In 2021, CELCIS invited local authority areas in Scotland to express their interest in participating in the Bright Spots Programme pilot. Three local

authority areas - Aberdeenshire, Dumfries & Galloway and East Ayrshire - were selected to take part in the initial pilot phase from January to April 2022. Selection criteria covered readiness to participate which included the identification of an influential local lead and a commitment to form a multi-agency working group; strategic buy-in from senior management across agencies providing services; and a commitment to respond to the survey findings and to embed the voice of children in local decision-making processes.

The pilot was extended to include a further three local authority areas who expressed interest in 2023. Aberdeen City, Scottish Borders and Stirling were selected to take part in this phase, carrying out the Bright Spots surveys from January to April 2024.

Each of the local areas that took part in the Bright Spots Programme pilot in Scotland received the responses to the surveys and the analysis of these shortly after the end of their phase of the pilot. The areas have been working to address the feedback the children and young people they care for and their care leavers have given them, through their local services to support them. Further information on local actions can be found on the CELCIS website.https://www.celcis.org/Brightspots

How to read the findings

The primary purpose of this report is to consider overall findings by combining responses from all six of the local authority areas, rather than identifying and comparing differences between local areas. Individual local authorities are therefore not identified.

The extent of variation across local authority areas can however be instructive because it provides evidence that particular experiences are not necessarily universal or inevitable. The lowest and highest percentages of children giving specific answers in local authority areas are shown to illustrate the extent of variation where this is noteworthy.

A higher percentage is not always more positive than a lower percentage, so, for example, when comparing the percentage of children who did not feel they had an adult they could trust, a lower percentage indicates that more children did have an adult they felt they could trust.

Comparison is also made with the Bright Spots comparator group, which is aggregate data from 42 local authority areas that have participated in Bright Spots in England and Wales between 2015 and 2020 and, where appropriate, with the general population in Scotland (where Scottish data was available) or

the general population in the UK or England. The extent of similarities to results for the comparator group from England and Wales suggests that many of the issues facing children in care are consistent and persistent.

Some of the survey questions asked children to provide a comment to explain their answers to particular questions. There were also two open-ended questions in the surveys for all age groups which asked children what would make being in care better for them, and if there was anything else they wanted to say about being in care. Their responses provided insights into many aspects of their experience of care. We have provided some of these insights and examples of their comments throughout this report where these were relevant to other questions that children were not specifically asked to comment on, to give a rounded representation of what was shared. For example, some children chose to write about their hobbies or their relationship with their social worker, or other aspects of their lives that were important to them.

Caution should therefore be taken in drawing any inference from these insights as these cannot be generalised to the wider population of care experienced children and young people, and the findings presented in this report should not be considered to represent the views of all children in care in Scotland.

For more information on Bright Spots in Scotland please refer to: https://www.celcis.org/Brightspots

The language used in this report

There are a few words and phrases used throughout the report which have been used to aid consistency in interpreting and understanding themes and patterns in the findings, to reflect the variety of children's experiences, and to recognise the legal context of children's care in Scotland. Some of the terms we have used are explained here.

The language used when describing the experience of children, young people and families who are supported by services is important. Language can be stigmatising. Where possible, we have tried to avoid using terms that could contribute to this. Where we have quoted children directly from their responses to the Bright Spots surveys, this is in their own words.

Children

In this report, the word children is used to describe all children under the age of 18. This is in recognition of the rights of children under the United Nations

Convention on The Rights of The Child (1989) which covers all children up to the age of 18 and is now incorporated into Scots Law and the responsibilities of public authorities under the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024 (Scottish Parliament, 2024). It is important to understand and acknowledge however that some adolescents and teenagers see themselves as young people and prefer to use that phrase.

Corporate Parents

Corporate parent is the term used in Scotland to refer to organisations (and individuals who work for them) who have a legal duty to respond to and support the care and protection needs of all children and young people. Their duties are laid out in Part 9 of the Children and Young People (Scotland) Act 2014. This covers over 90 local and national public bodies and agencies.

Kinship Care

In this report, kinship care, where children in need of care and protection are cared for by relatives who are not their parents or by close family friends, is referred to as being cared for by wider family or friends. This is to make the distinction in understanding between parents and others in what children told us about who looks after them.

'Looked after'

'Looked after' children is the legal definition used to refer to children who are in the care of a local authority in Scotland.

Residential child care

In Scotland, residential child care is the term used to describe a care and home environment experienced by children who cannot be cared for by their parent, with carers providing 24/7 support, supervision and assistance. This will include residential schools for children with complex or specialist needs, and will also alternatively be called children's homes, children's houses or group homes.

'Somewhere else'

To reflect the range of experiences and the language children themselves used in their survey responses for how and where they are cared for, the term 'somewhere else' is used in this report to include where children had spent time being cared for by more than one different type of carer, or were living in

supported accommodation or were already living independently, and children who were living in secure care.

Statistically significant

As this report includes an analysis of what children shared through the surveys, in part to understand where there might be differences between ages, gender or types of care, for example, statistical tests allow us to assess the likelihood that these differences have not arisen purely by chance. Where we say that a difference is statistically significant in this report, this means that there is a 95% probability that it is not due to chance and only 5% probability that the difference we see is due to chance. Statistical significance does not tell us how important or strong a difference is, it simply tells us the likelihood that the difference between groups is not because of chance.

The Your Life, Your Care Surveys



Survey content

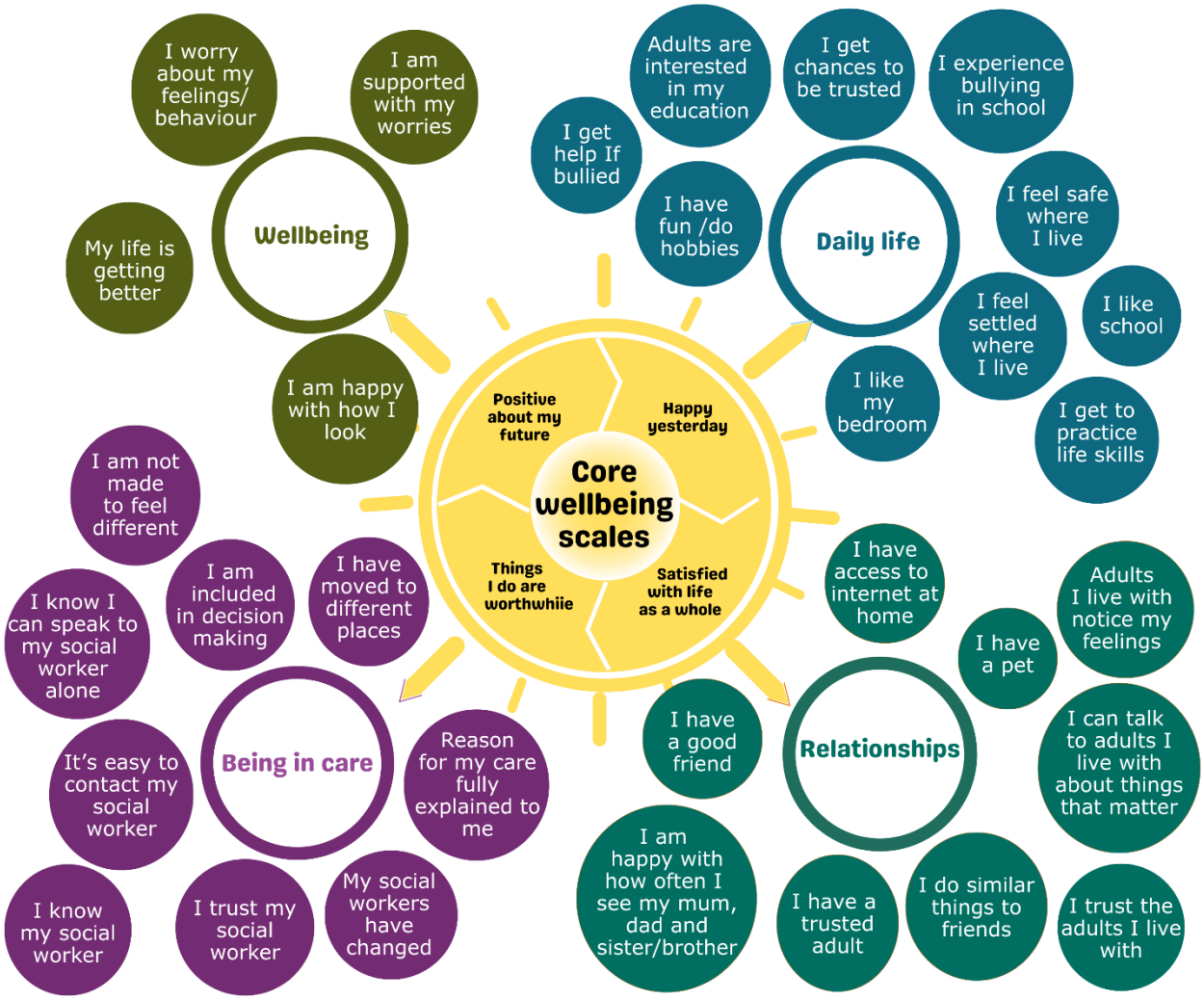


Figure 2. Your Life, Your Care Bright Spots wellbeing indicators

The co-production process with children and young people with experience of care led to inclusion of questions relating to topics that they identified as being important to them. The Your Life, Your Care surveys contain questions (indicators) that span relationships, daily life, the experience of being in care, and questions about general wellbeing.

Three versions of the online survey address the wellbeing of different age groups of children. The youngest children (4-7yrs) are asked 16 questions appropriate to their age and stage of development; children aged 8-11yrs (which includes 11-year-olds of primary school age) are asked an expanded set of 37 questions, and older children aged 11 to 17yrs (including 11-year-olds of secondary school age) are asked the full set of 51 questions. Four core wellbeing scales are used to understand to what extent older children (11-

17yrs) may have low overall wellbeing or very high overall wellbeing, which then allows exploration of which elements of their experience are associated with overall wellbeing.



Answering all the questions was optional to allow children to make their own decisions about which questions they would like to answer. Therefore the number of responses differs by question, so the base number of responses (n) is provided for each figure and table. The youngest children taking part were supported to complete the survey by a trusted adult, and older children were also offered similar support. A trusted adult is someone the child or young person already has a relationship with, such as a guidance teacher, an engagement or participation worker or a support worker. For this programme activity, social workers, key workers and carers could not take on the trusted adult role because some of the questions relate to them and their roles.

Who took part in the Your Life, Your Care surveys?

Who are children in care?

In Scotland, legislation that supports a local authority to take on some legal responsibility for the care and wellbeing of a child, defines a child as being 'looked after' or 'in care'. Depending on their need for care and protection, children in care can be cared for in different care settings. Some children are formally in care and are living at home with a parent or parents, for example, with a Compulsory Supervision Order put in place by a Children's Hearing; some will be being cared for by foster carers, some by kinship carers who are wider family members or friends, and some children will be cared for in residential child care (including residential schools), or in secure care. Depending on their needs, some children may live in other settings, such as supported accommodation.

Number of responses

Bringing together all the responses from children who completed the Brights Spots surveys in Scotland in 2022 and 2024 across the six local authority areas, the overall response rate was 59%. That is 888 out of 1,506 identified children, and the response rates varied from 41% to 72% between the individual local authority areas (Figure 3).

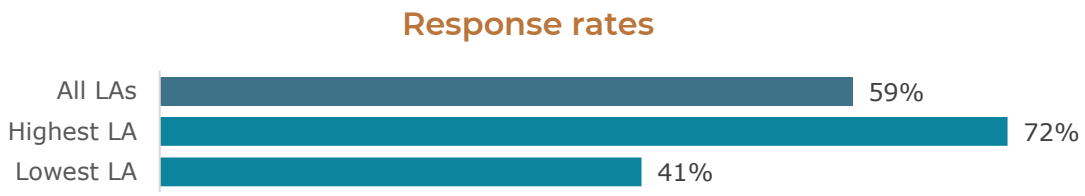


Figure 3. Response rates

Gender, age and ethnicity of children responding to the surveys

Gender of children, by age group

Gender	4-7yrs (n=169)	8-11yrs (n=245)	11-17yrs (n=474)	All ages (n=888)
Girls	51%	47%	43%	46%
Boys	47%	51%	53%	51%
I don't want to say	-	1%	2%	1%
Let me tell you	-	0%	2%	1%
Missing	1%	0%	1%	1%

Table 1: Gender of children, by age group

Just over half (51%) of all children who took part were boys, and 46% were girls (Table 1). 2% didn't answer the gender question or didn't want to say, and 1% described themselves as 'both', non-binary, gender-fluid or trans. Analysis presented in this report shows differences between the experiences of girls and boys where this is noteworthy, but children who did not describe themselves as girls or boys are not a large enough group to allow comparison to girls and boys. The relative proportions of boys and girls responding to the surveys were similar to those for all children in care in Scotland in 2023 (Table 2, Scottish Government 2024a), but girls are slightly overrepresented when comparison is made to the gender balance of the six local authority areas combined.

Gender representation

Gender	Bright Spots: All ages (n=862)	All children in care in 6 participating LA areas, 2023	All children in care in Scotland, 2023
Girls	47%	42%	46%
Boys	53%	58%	54%

Table 2: Gender representation

Just over half (53%) of children responding to the surveys were of secondary school age or over (11-17yrs), with 28% aged 8-11yrs and 19% aged 4-7yrs (Figure 4).

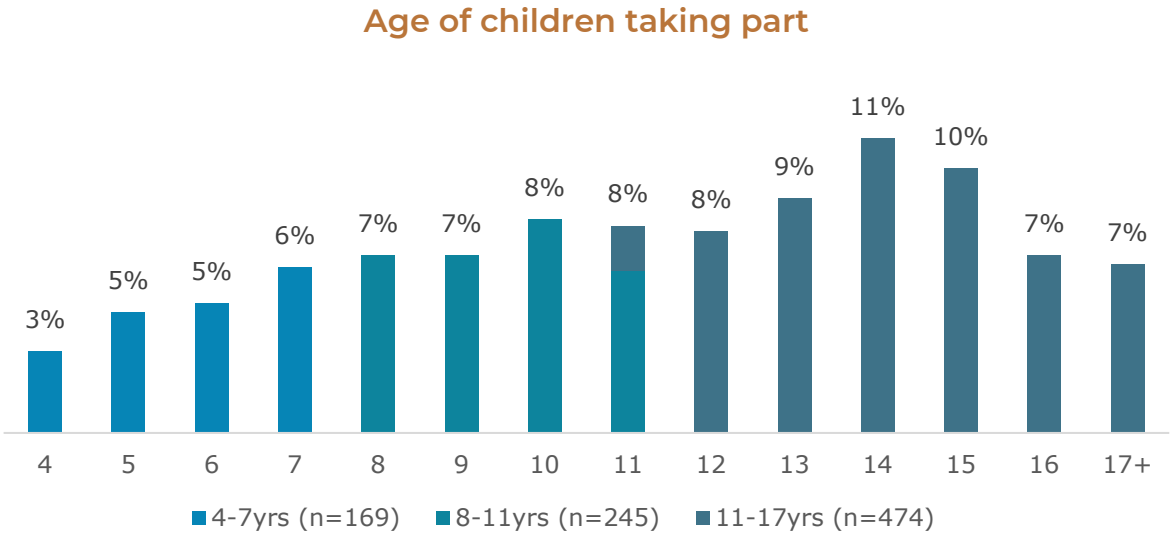


Figure 4: Distribution of responses by age

Children from minority ethnic backgrounds made up 5% of those responding to the surveys in Scotland (Table 3), a much smaller proportion than the 30% of children responding to the surveys in England and Wales (Selwyn & Briheim-Crookall, 2022).

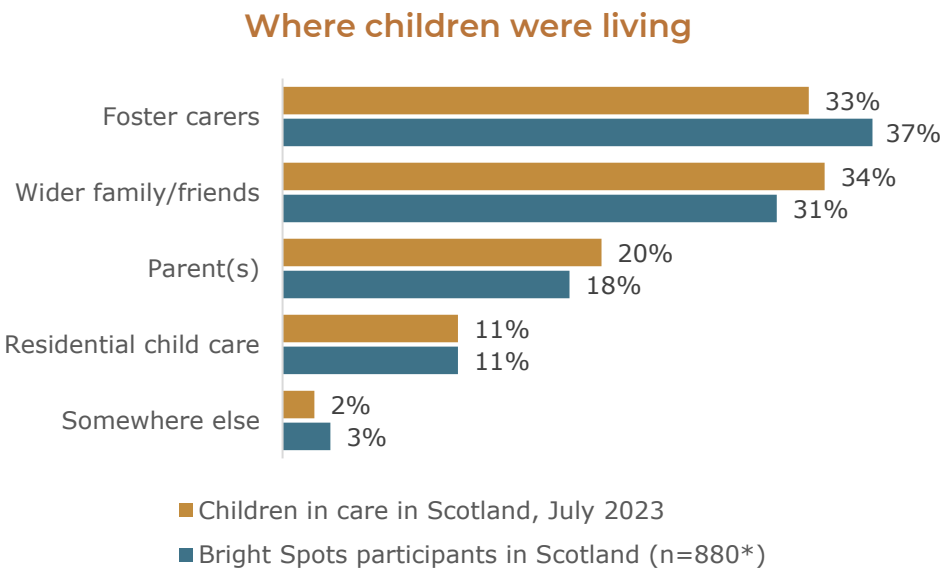
Ethnicity

Ethnicity	n	%
Asian	5	0.6%
Black	7	0.8%
Mixed	24	2.7%
White	824	92.8%
Other	8	0.9%
I don't want to say	11	1.2%
Missing	9	1.0%
Total	888	100%

Table 3. Ethnicity

Coram Voice has been able to look at variation in responses by ethnicity when reporting at a national level in England, but the relatively small numbers make analysis of variation of wellbeing by ethnicity inappropriate for Scotland. National data showed that 6% of all children in care in Scotland in 2023 were from a 'minority ethnic group', which included children of mixed ethnicity (Scottish Government, 2024a)

Where children were living and length of time in care



*An additional 8 children did not identify where they were living.

Figure 5. Where children were living, Bright Spots participants and all children in care in Scotland

Looking across all the age groups (4-17 yrs) for the six Scottish pilot areas, at the time they responded to the survey, almost half (49%) of the children in care were either living with their wider family or friends (31%) or with their parent(s) (18%). Over a third were being cared for by foster carers (37%), with 11% living in residential child care, and 3% living 'somewhere else'. Somewhere else includes children spending time in more than one care setting, those living in supported accommodation or already living independently, and children living in secure care.

These figures are broadly similar to what we understand from the national Children's Social Work Statistics (Scottish Government, 2024a) which show how and where children in need of care and protection are cared for: 33% by fosters carers, 34% by wider family or friends, 20% by their parent/s in their parental home, and 11% in residential child care, excluding secure care (Figure 5).

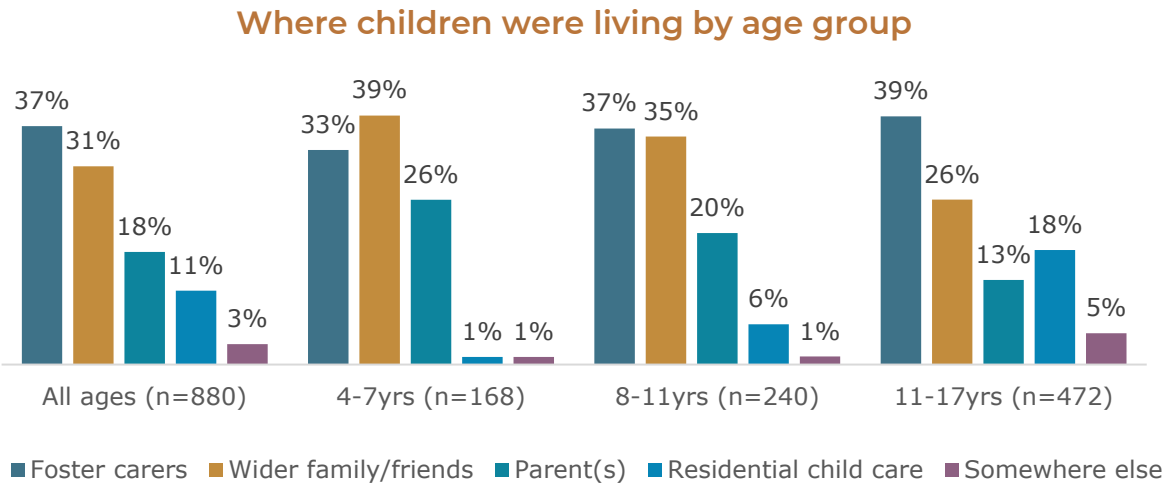


Figure 6. Where children were living, by age group

Looking at differences between the age groups, older children in care were less likely to be living with their parent(s) or wider family and friends (Figure 6). Whilst the proportion of children being cared for by foster carers was similar across age groups, 18% of 11–17-year-olds were living in residential child care, compared to 6% of 8–11-year-olds and 1% of 4-7-year-olds.

Bright Spots asked the trusted adults supporting the youngest children (4-7yrs) to complete their survey to indicate how long each child had been in care, and older children (8-17yrs) were asked how long they had been in care.

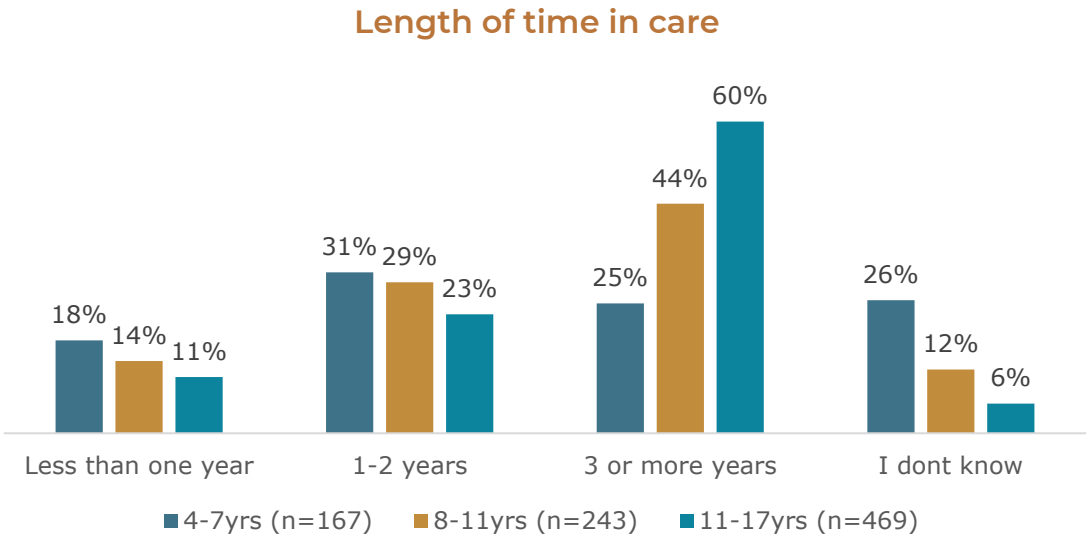


Figure 7. Length of time in care by age group

The majority (60%) of older children (11-17yrs) had been in care for more than three years, compared to 45% of children aged 8-11yrs and a quarter of children under the age of 8 (Figure 7). Not surprisingly, the youngest children (4-7yrs) were more likely to have been in care for less than three years.

Bright Spots asked the older children (11-17yrs) how many times they had moved to live with different carers while they had been in care. They could answer 'I have not moved', '1 to 3 moves', '4 to 6 moves', 7 to 9 moves, 10 or more moves', or 'I don't know'.

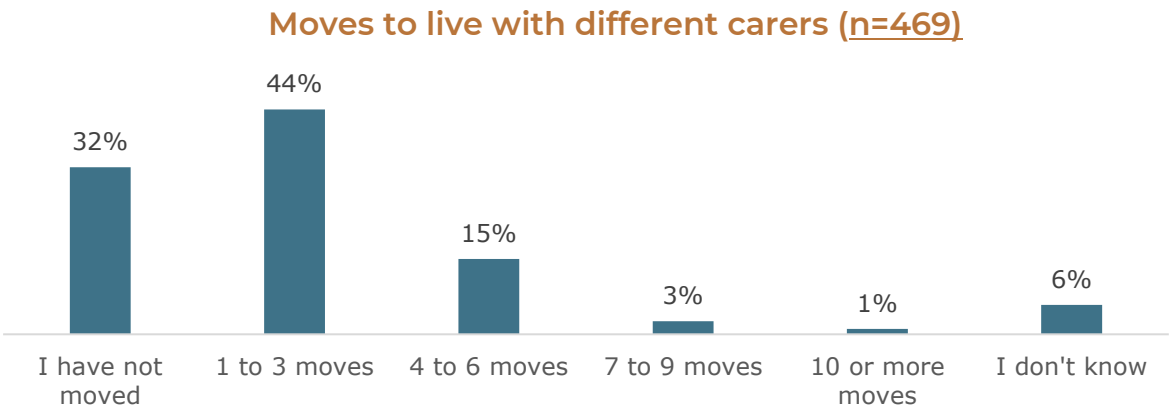


Figure 8. Experience of moves while in care

Just under a third of children shared that they had not experienced a move, but almost one in five (18%) shared that they had experienced four or more moves to be cared for by different carers (Figure 8).

The question asked in Scotland differed to the one used in England and Wales, which asked how many placements the child or young person had rather than how many moves to live with different carers they had experienced. The term placement was specifically identified as 'system language' that should not be used because it can contribute to stigmatisation (Independent Care Review, 2020b). It is particularly inappropriate for the 20% of children formally in care in Scotland who continue to live at home with parents and would not consider themselves to have been 'placed' there (Scottish Government, 2024a). The percentage of the comparator group in England and Wales that had one placement since coming into care (34%) was similar to the number in Scotland that had not moved since coming into care (32%).

The proportion of children who did not experience a move ranged from 27% to 40% across local authority areas in Scotland, and the proportion with four or more moves ranged from 12% to 29%.

The length of time in care was associated with the number of moves experienced while in care (Figure 9), with children in care for more than two years more likely to have experienced four or more moves.

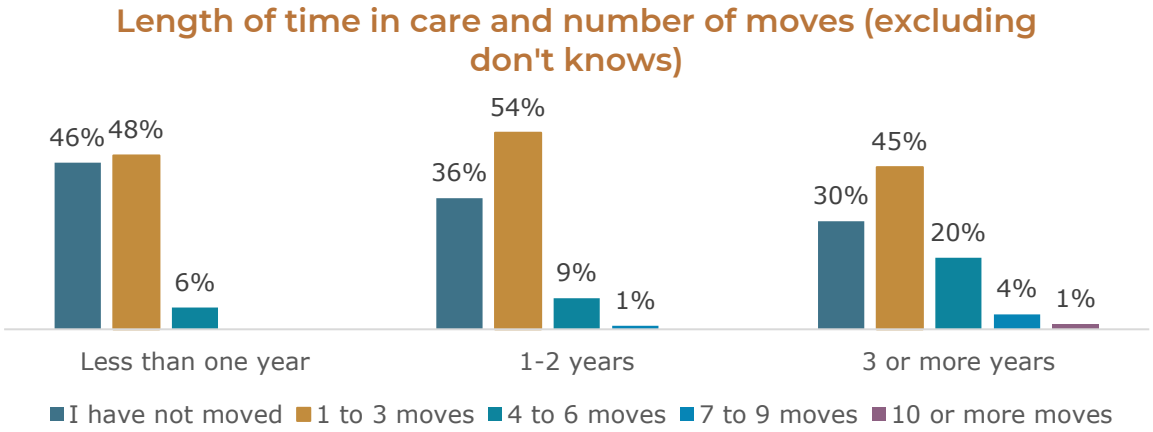


Figure 9. Length of time in care and number of moves

Summary – Who Took Part

Survey completion rate

- Surveys were completed by 888 of out of 1,506 children in care identified by the six local authority areas who participated in Scotland in 2022 and 2024, giving an overall response rate of 59%. One local authority achieved a 72% response rate.

Gender of children

- Just over half of the children completing the survey were boys (51%), 47% were girls, 1% provided their own description, and 2% preferred not to say or skipped the question.

Ethnicity of children

- One in twenty children responded (5%) were of Black, Asian, Mixed or Other ethnicities. The small number of children in these categories prevents meaningful analysis by ethnicity.

Where children were living

- At the time of taking the survey, 37% were being cared for by foster carers, 31% by wider family or friends, 18% by their parent/s, and 11% by residential child care.

Length of time in care

- The majority of older children (11-17yrs) had been in care for three or more years, as had 45% of those aged 8-11yrs and a quarter of the youngest children (4-7yrs).

Moves in care

- For older children (11-17yrs), the length of time they had been in care was associated with more moves to live with different carers. Almost one in five (18%) of these children had experienced four or more moves, and almost a third (32%) had not experienced a move.

Relationships



Relationships

Having supportive relationships is inextricably linked to wellbeing. Supportive relationships are fundamental to everyone's mental, emotional, and physical wellbeing. Our strong social connections help buffer stress, improve emotional regulation, and build resilience, whereas social isolation is linked to significant health risks (Holt-Lunstad, 2024). However, the quality of relationships is crucial: strained or harmful relationships can undermine wellbeing and contribute to poorer mental health (The Health Foundation, 2024). The Bright Spots surveys asked children about their relationships with adults, including those they lived with, about friendship, about relationships with their families, and if they had pets.

Having an adult I trust

A substantial body of research has highlighted the role that having an adult they trust can play in helping children and young people overcome traumatic experiences (ONS, 2020; Frederick et al., 2023). Children participating in the Office for National Statistics (ONS) (2020) focus groups about what makes their lives happy spoke about relationships and 'the need for trust', including having someone they can rely on and talk to, and someone who 'never lets you down'. Having an adult they can trust provides children and young people with emotional support, safety and guidance.

The Scottish Government's refreshed Getting it Right for Every Child (GIRFEC) policy statement (Scottish Government, 2022a) recognises that safe, supportive relationships with adults who are trusted helps children and young people to address and overcome adversity and trauma and go on to reach their full potential.

Bright Spots asked the children aged between 8-17 years if they had an adult who they trusted, who helped them and would stick by them no matter what. They could answer 'Yes, or 'No'.

Most children responded that they did have an adult they could trust, with 94% of children aged 8-11yrs answering yes, marginally above the 92% of older children aged 11-17yrs (Figure 10).

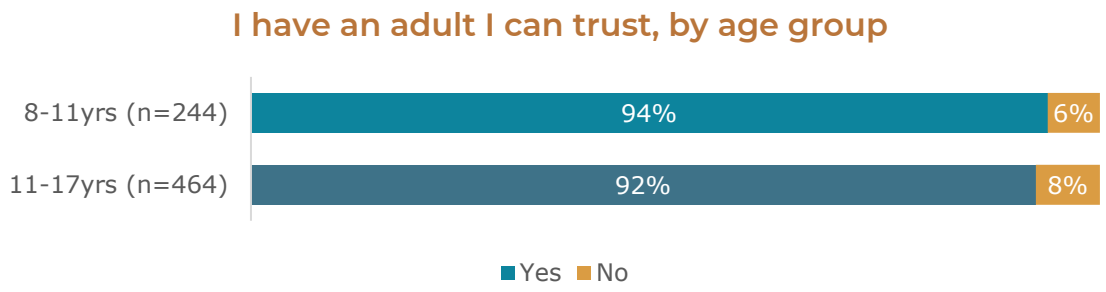


Figure 10. I have an adult I can trust, by age group

Looking across the responses from all six Scottish local authority areas, all 8-11-year-olds in one area had an adult they could trust and rely on but in another area 11% did not. For children aged 11-17yrs, figures ranged from just 2% who did not have an adult they could trust through to 16%. (Figure 11).

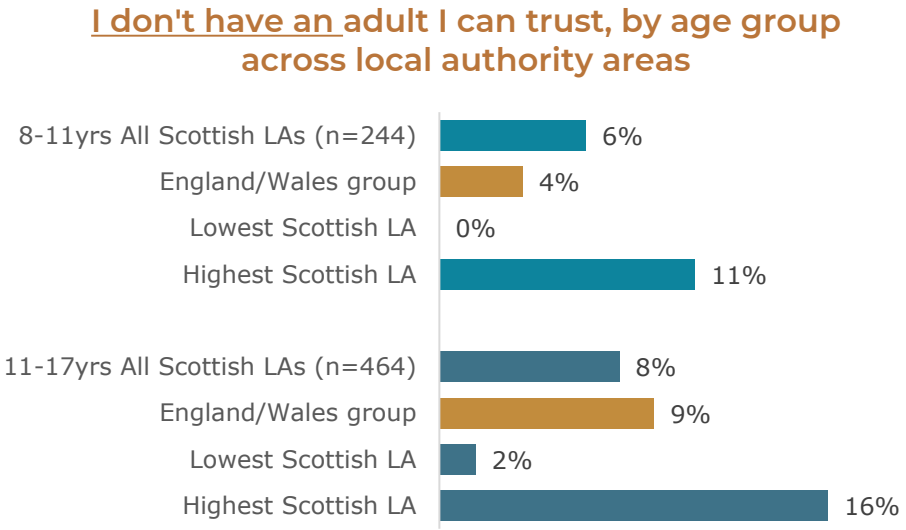


Figure 11. I don't have an adult I can trust, by age group, across local authority areas

> *"I find it hard to trust adults." (11-17yrs)*
>
> *"I feel there is always people around me that care and love me and want to see me grow in life." (11-17yrs)*

Relationships with adults and carers

Trusting the adults I live with

Trusting the adults that children live with provides a safe and secure foundation which is key for a child or young person's healthy development.

Children told the Independent Care Review in Scotland of their need for "safe, loving and respectful relationships" (Independent Care Review, 2020a, p.19).

Bright Spots asked all children whether they trusted the adults they lived with. The youngest children (4-7yrs) had two response options to choose from: 'Mostly yes' and 'Mostly no'. Children aged 8-11yrs and older children aged 11-17yrs had four response options to choose from: 'All/ most of the time', 'Sometimes', 'Hardly ever' and 'Never'.

Many of the children sharing their experiences through the Bright Spots surveys in Scotland felt strong trust and emotional safety with the adults they lived with.

Trust in the adults they lived with was most evident for the younger children, with almost all 4–7-year-olds feeling they were supported in this way (96%, Figure 12).

"I love Nana. She helps me and makes me safe." (4-7yrs)

Trust naturally changes as children grow older, become more independent and test boundaries, and this is demonstrated in Figure 12, which shows that for some or all of the time, almost a quarter of older children (11-17 years) did not trust the adults they lived with.

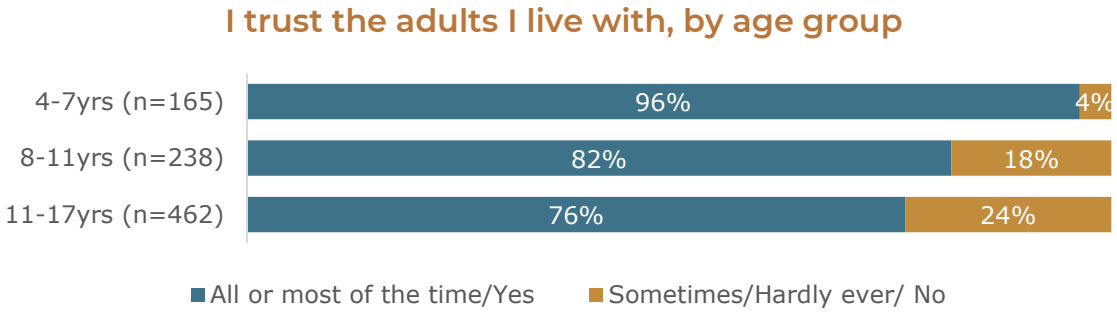


Figure 12. Trust in adults the child lives with, by age group

The proportion of children trusting the adults they lived with changed depending on where they were living and who they were living with.

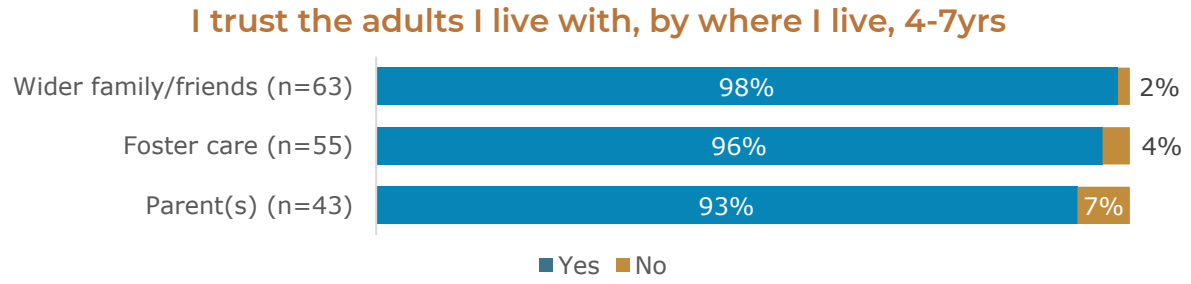


Figure 13. Trust in adults the child lives with, by type of care, 4-7yrs

For the youngest children aged 4-7yrs, the percentage who trusted the adults they lived with all or most of the time ranged from 98% for those living with family or friends to 93% of those living with their parents (Figure 13).

"Granny makes the house safe. I like it there." (4-7yrs)

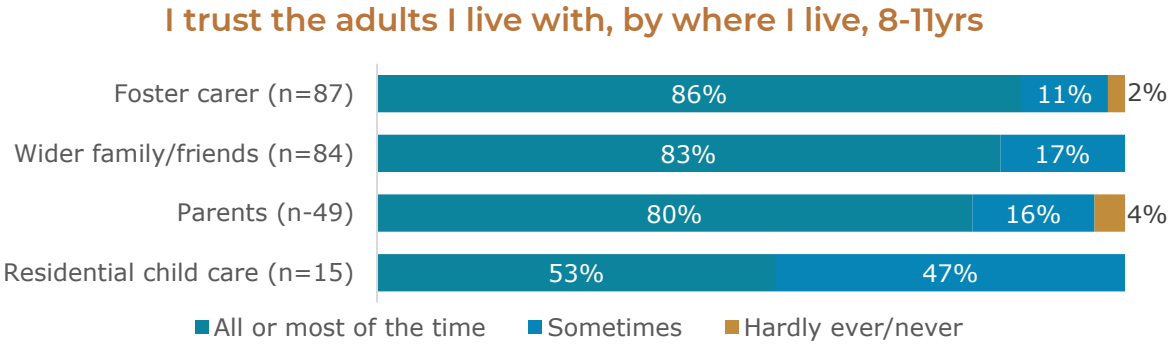


Figure 14. Trust in adults the child lives with, by type of care, 8-11yrs

Figure 14 shows that just over half of children aged 8-11yrs living in residential child care trusted the adults they lived with all or most of the time (53%). Despite the small number of children this applies to, this was significantly below the feelings of those being cared for by foster carers, and also below those living with friends or family, or with their parents:

"…I feel…safer and they are so kind and lovely, I just love them so so so so much." (8-11yrs, Foster care)

"I love staying with my Auntie, she keeps me safe and she cares about me." (8-11yrs, Wider family)

"Sometimes I don't like people coming in my space when I am angry". (8-11yrs, Residential child care)

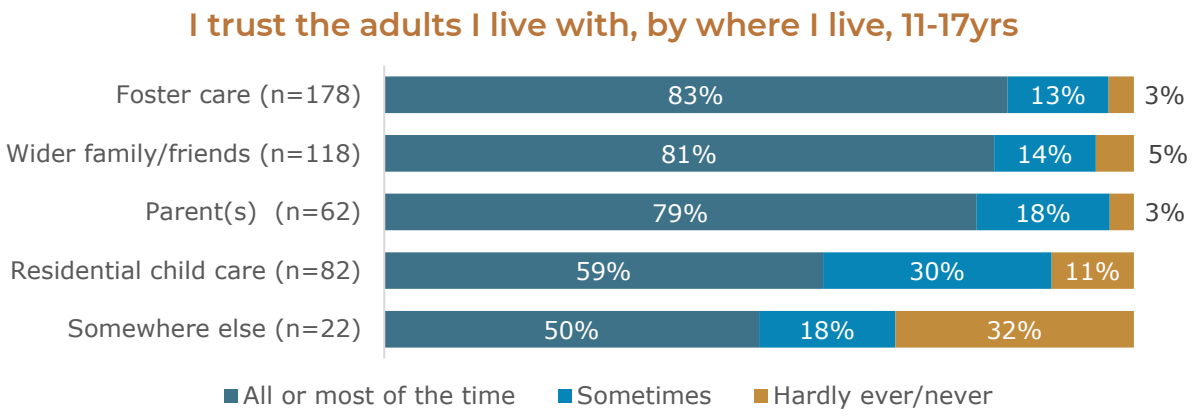


Figure 15. Trust in adults the child lives with, by type of care, 11-17yrs

For older children (11-17yrs), again those living in residential child care showed that their levels of trust in the adults they lived with was lower than children being cared for in other environments, apart from the small number living somewhere else, some of whom were living in secure care (Figure 15). Three in five children living in residential child care trusted the adults they lived with all or most of the time (59%), significantly below the four in five of children living with foster carers or with wider family or friends (83% and 81%). Comments from older children (11-17yrs) living in residential child care highlighted frustration with rules, feeling a lack of privacy, and difficulty communicating with the adults they lived with, and one older child felt that residential staff were in a difficult position:

> *"The staff don't tell me stuff. People phone to tell me stuff and I'm not getting told." (11-17yrs)*
>
> *"I don't feel safe in the home because the staff invade my privacy by coming into my room unannounced. They touch my belongings without my permission. They don't leave us alone." (11-17yrs)*
>
> *"It's alright to an extent, but living in residential can get quite tough because there is always some kind of drama… I feel as if the staff have your best interest at heart, but sometimes they get caught up with the rules and forget about real life." (11-17yrs)*

Having carers who are sensitive and notice how children are feeling

Carers play an important role in meeting the emotional needs of children to help create a healthy foundation for them to flourish (Steenbakkers et al., 2018). Sensitive parenting by carers of children who have experienced trauma

is important for supporting their recovery and emotional development (Furnivall & Grant, 2014)

Figure 16 shows that almost nine in 10 children aged 4-7yrs felt that their carers noticed how they were feeling (88%), while two-thirds of children aged 8-11yrs (67%), and half (51%) of older children (11-17yrs) felt that their carers noticed their feelings all or most of the time. At least one in 10 children in each age group felt that their carers did not notice or rarely noticed how they were feeling. While children expressed a mix of positive and negative feelings, many felt happy, cared for, listened to, and supported by carers and family members. It was mostly children in the older age group who felt unheard, stressed, or misunderstood, particularly when adults focused on rules, rather than their reasons or feelings:

> *"I am so happy and I love the grown-ups that look after me!" (4-7yrs)*
>
> *"I used to be with another foster carer, but I did not like it there. I was sad a lot, but I really love where I am now." (4-7yrs)*
>
> *"They should listen to me more. It makes me stressed and upset." (11-17yrs)*

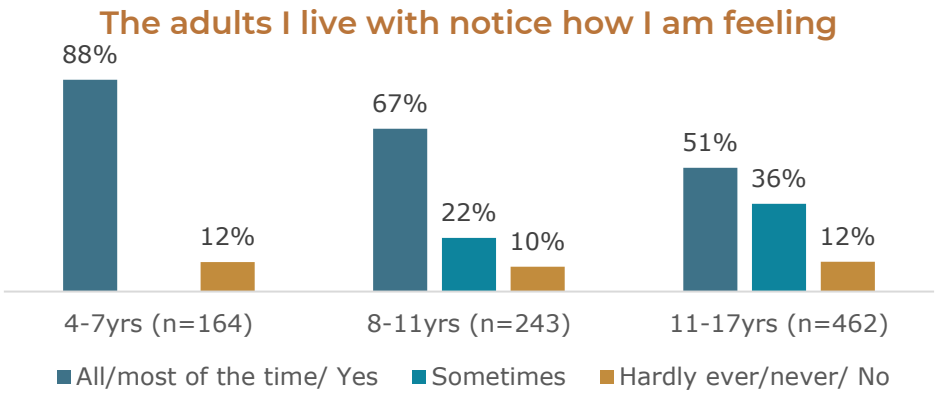


Figure 16. The adult(s) the child lives with notice their feelings

59% of older children (11-17yrs) who were cared for by foster carers felt that the adults that they lived with noticed their feelings all or most of the time compared to 45% of the children in that age group who were cared for by wider family and friends, and 47% of those living with their parents (Figure 17).

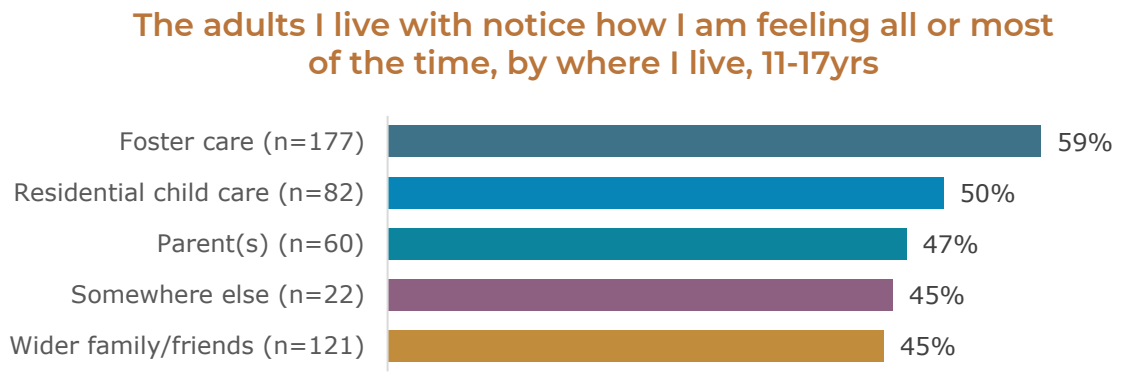


Figure 17. The adult(s) the child lives with notices their feelings all or most of the time, by type of care, 11-17yrs

Looking across the Scottish local authority areas, the percentage of children aged 4-7yrs who indicated that the adults they lived with noticed how they were feeling all or most of the time ranged from 79% up to 93% (Figure 18). For children aged 8-11yrs, the variation was more substantial, ranging from just over half of children (53%) in one area to just over three quarters of the children in another area (78%). For the oldest children (11-17yrs), percentages again varied substantially, ranging from 38% to 64%.



Figure 18. The adult(s) the child lives with notices their feelings all or most of the time, across local authority areas, by age group

"I have been really well taken care of by my different carers. Made me feel welcome and they noticed I was sad." (11-18yrs)

"My mummy was not able to look after me and my Auntie was able to look after me and she knows when I feel sad." (4-7yrs)

Talking with adults I live with about things that matter

It is important for children and young people to be able to communicate openly with the person or people who care for them. When done effectively, a child can feel heard, respected and understood (NSPCC, 2024). Children responding to the ONS Personal well-being survey 2020 identified that supportive family relationships were important for a good home life and in turn influence a child's willingness to engage and be open with their family (ONS, 2020).

The Bright Spots survey asked 11–17-year-olds how often they talked to the adults they lived with about things that mattered to them? They could answer: 'Most days', 'More than once a week', 'Less than once a week', and 'Hardly ever'.

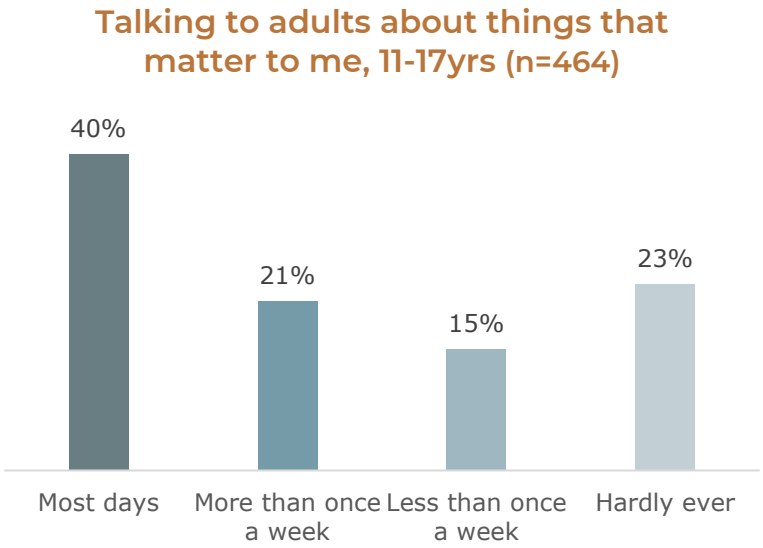


Figure 19. Talking to adults about things that matter to the child, 11-17yr

Two in five (40%) of the older children talked to adults 'most days' about things that mattered to them, and a further one in five (21%) talked more than once a week (Figure 19). There were no significant differences between children living in different care settings.

> *"I feel like adults listen to what I have to say and what's important to me." (11-17yrs)*
>
> *"I feel listened to by my parents (foster carers) and most of the time by the team around me." (11-17yrs)*
>
> *"I feel like if I have something important to say, people will listen." (11-17yrs)*

The percentage of older children (11-17yrs) who indicated they could talk to adults more than once a week about things that matter to them was below (but not significantly below) the Bright Spots comparator group (61% to 66%, Figure 20). There was substantial variation across the six Scottish local authority areas, with half of children (49%) in one area talking to adults about things that they felt mattered more than once a week, through to almost three quarters in another area (73%).

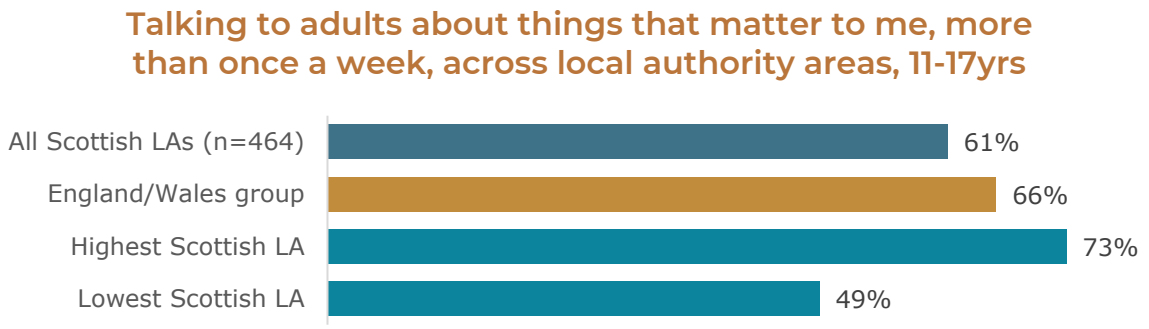


Figure 20. Talking to adults about things that matter to the child, more than once a week, across local authority areas, 11-17yrs

Friendships

Having good friends

Children and young people told the Independent Care Review in Scotland about the importance of their friendships not just to allow them to socialise and have fun, but in helping them to overcome feelings of isolation, improve their mental health and develop their sense of identity (Independent Care Review, 2020b). Friendship was seen as having a significant impact on overall wellbeing. The Your Life, Your Care survey findings echo the findings of ONS research with children aged 10-15 across the UK who felt that good, close friendships were an important part of a happy childhood (ONS, 2020). Having a friend was important because it brought them happiness, comfort, and a sense of normality, and for some, the security of having someone they could trust.

Children and young people involved in the development of the Your Life, Your Care surveys suggested that a question about friendship rather than about loneliness should be asked.

Bright Spots asked all the age groups of children if they had a really good friend, and they could answer 'Yes' or 'No'.

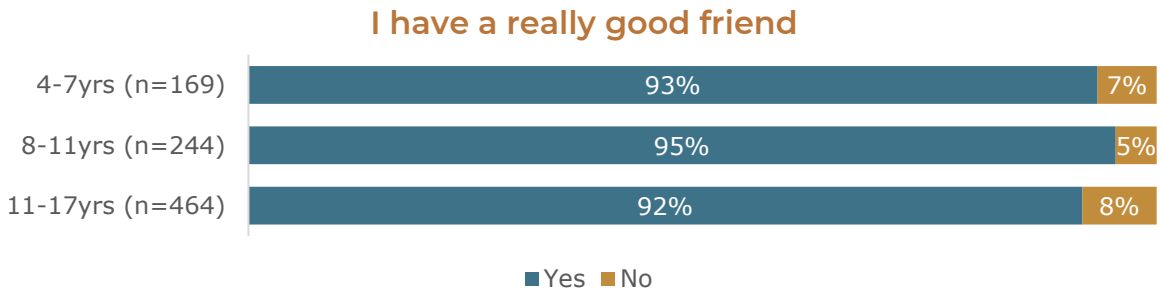


Figure 21. Having a really good friend

A large majority of children across all age groups did have a really good friend, and the importance of friendship was mentioned in the comments some of the children shared with the survey (Figure 21):

> *"I like my friendships." (4-7yrs)*
>
> *"Having friends nearby and having my foster parents around makes me feel safe." (8-11yrs)*
>
> *"Being with friends. I don't like being alone." (11-17yrs)*

However, between 5% and 8% of children across all age groups said that they did not have a good friend.

When we looked at the responses by where the children were being cared for, there was greater variation. One in five of children (8-17yrs) who were living in residential child care or a place they said was somewhere other than with their parents, or foster or kinship carers, said they did not have a really good friend. This is a significantly higher proportion than their peers who were living with family of friends, with their parents, or with foster carers who also said they did not have a really good friend (Figure 22).

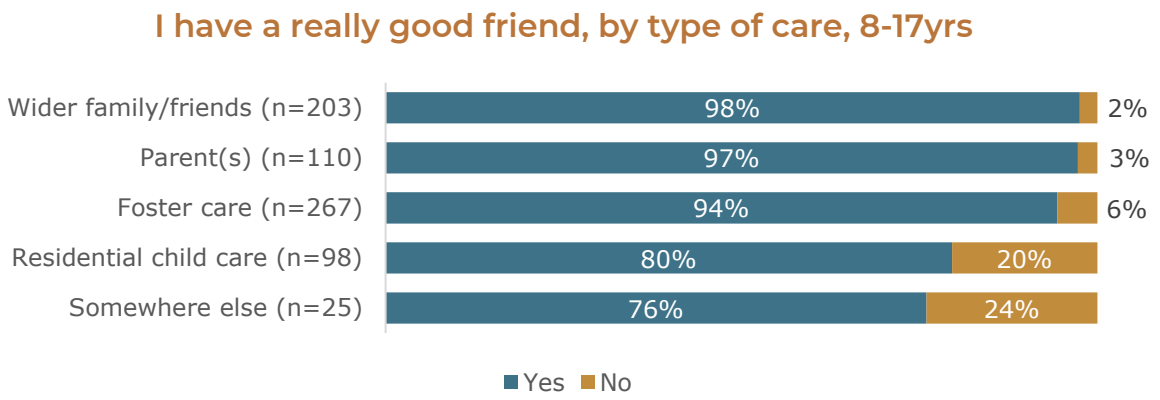


Figure 22. Having a really good friend, by type of care, 8-17yrs

As many as one in five younger children (4-11yrs) did not have a really good friend in some local authority areas, whereas all or almost all younger children did in other areas (Figure 23). Small numbers in categories in some local authority areas mean that these differences should be treated with caution.

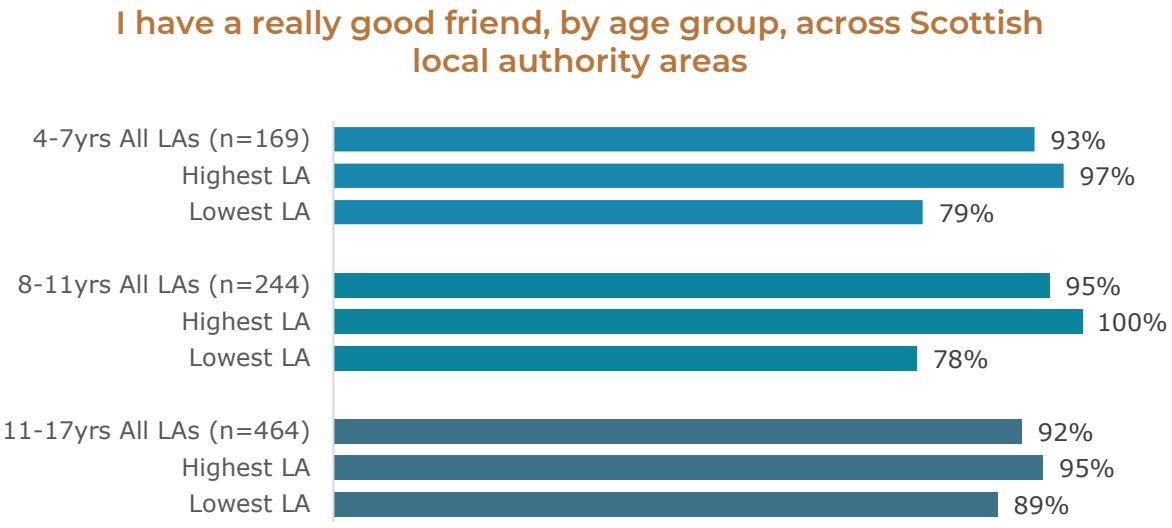


Figure 23. Having a really good friend, by age group, across Scottish local authority areas

Doing similar things as my friends do

The Promise of the Independent Care Review highlighted the importance that children attached to keeping their lives as 'ordinary' as possible, avoiding things that made them feel different to their peers who were not in care (Independent Care Review, 2020b).

Bright Spots asked the older children (11-17ys): 'Outside of school, college or university do you get the chance to so similar things to your friends?'. Answer options were 'All or most of the time', 'Sometimes' or 'Hardly ever/Never'.

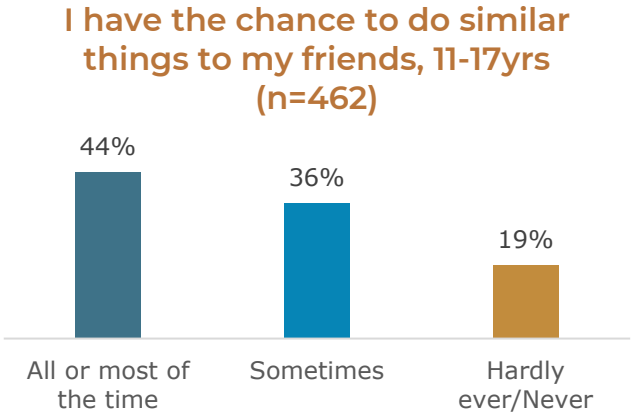


Figure 24. Having the chance to do similar things to friends, 11-17yrs

81% of the older children (11-17yrs) responding to the survey indicated that they got the chance to do similar things to their friends at least some of the time (Figure 24):

"I get the same opportunities as people that are not in care." (11-17yrs)

One in five of older children (19%) shared that they hardly ever or never got the chance to do similar things to their friends, and less than half (44%) indicated that they got the chance to do similar things to their friends all or most of the time (Figure 24). Stricter rules and limits on freedom were offered as reasons why young people could not do the same things are their friends. This left them feeling frustrated, left out, and different from others:

"Things are not as strict for my friends who are not in care." (11-17yrs)

"I wanted to be treated like the older young people as they get more freedom with devices and going out in the community." (11-17yrs)

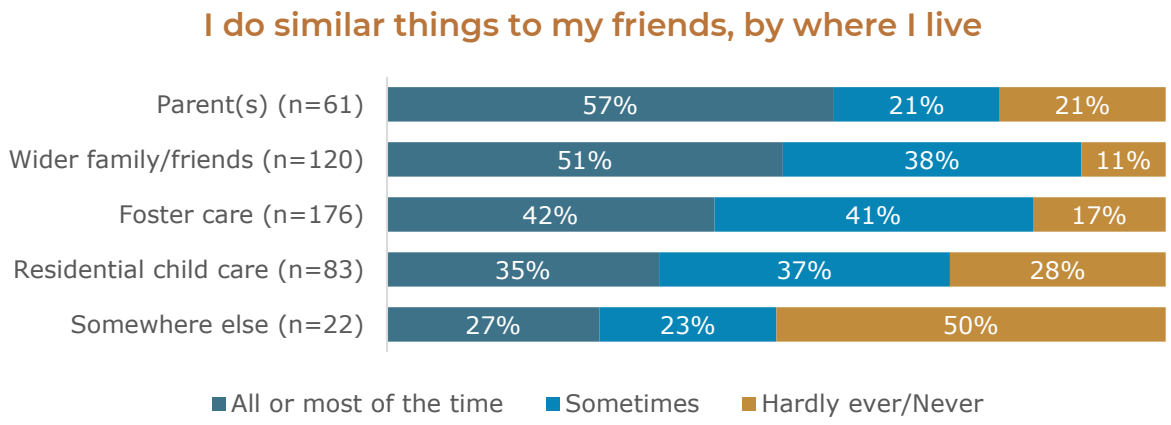


Figure 25. Having the chance to do similar things to friends, by type of care

There was also variation depending on where the children were being cared for. Over a quarter of older children (11-17yrs) living in residential child care (28%), shared that they hardly ever or never got the chance to do similar things to their friends, compared to one in ten of the children living with their wider family or friends (11%, Figure 25). Some of the older children living 'somewhere else' were living in secure care, which may help to explain the high proportion who hardly ever or never felt they got the chance to do similar things to their friends (50%).

Again, for some children living in residential child care, there was a feeling of unfairness about perceptions of being treated differently to their friends:

"I think before I became 16 I was frustrated at times and felt a bit like I was in care. For example, not being able to go for sleepovers etc. Now I am 16 I feel like a regular young person." (11-17yrs)

"I don't like having to go [to] bed at the same time every night - especially at the weekends when I have to go to bed at the same time as school nights. This is different from my friends. I don't like getting my phone taken off me at night - my friends don't have to. I don't think this is fair." (11-17yrs)

Connecting to the internet

Across the UK, most households with children have internet access, and many children use the internet regularly for learning, communication, entertainment, and social interaction. Ofcom (2024) data indicates that 99% of children spend time online, and that nine in 10 children own a mobile phone by the time they reach the age of 11. The Scottish Household Survey reported in 2022 that 91% of households in Scotland had internet access, although in the 20% most deprived areas of Scotland it was 84% of households (Scottish Government, 2023a). Younger internet users are more likely to access the internet using a smartphone. Research has previously highlighted the 'digital divide' between children in or leaving the care system and their peers in the general population (McGhee & Roesch-March, 2020).

Bright Spots asked older children (11-17yrs) if they could connect to the internet where they were living. They could answer 'Yes' or 'No'.

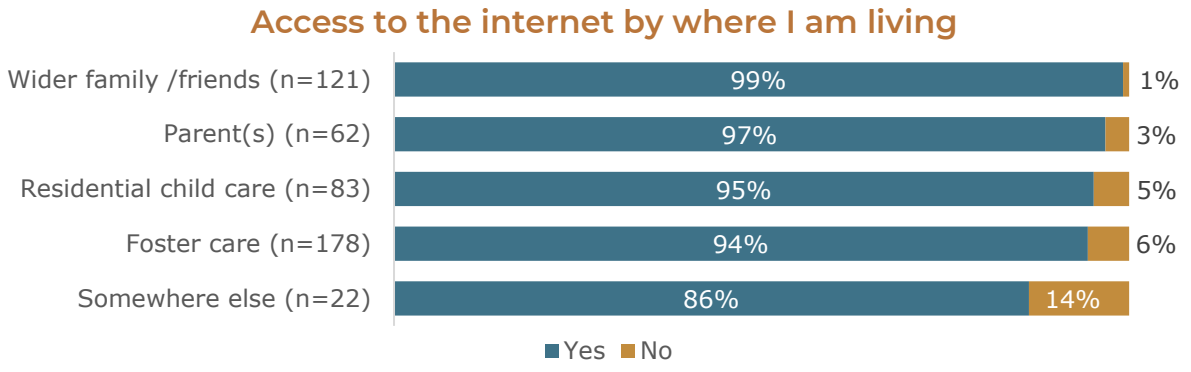


Figure 26. Access to the internet, by type of care

Most older children (11-17yrs) answering the survey said they had access to the internet at home, although one in twenty being cared for in residential

child care (5%) or by foster carers (6%) indicated that they did not. Three of the 22 children who said they were living somewhere other than with their parents, foster or kinship carers, or residential child care (14%), also did not have access to the internet (Figure 26).

> *"I talk to my brother on snapchat sometimes." (11-17yrs, Foster care)*
>
> *"Better internet." [would make being in care better] (11-17yrs, Residential child care)*
>
> *"More access to the internet." [would make being in care better] (11-17yrs, Foster care)*

Family relationships

The Promise of the Independent Care Review in Scotland states that if children are safe in their families they must stay with them, with families being given support for this to happen (Independent Care Review, 2020a). However, when this is not possible, and children need to go into care, national guidance states that family time for children should not only include time with their parents, but also time with their siblings. The right of siblings to maintain relationships with their brothers and/or sisters is recognised in national guidance in Scotland (Scottish Government, 2021a).

Bright Spots asked children (8-17yrs) if they saw their mum, dad, brothers and sisters 'too much', 'just the right amount' or 'too little'. They could also explain 'I don't see them', 'Mum or dad has died', or 'I do not have brothers and sisters'.

The calculations for the response rates exclude the children who answered that they had lost a parent. 19% of the children (8-17yrs) responding to the Bright Spots survey in the Scotland pilot had experienced the death of one or both of their parents (19%). 9% shared that their mum had died, 8% shared that their dad had died, and a 2% had experienced the death of both of their parents. Comparative population-level data is dated but shows that 1 in 20 (4.7%) of children in Britain experience the death of one or both parents by the age of 16 (Parsons, 2011). The proportion of children responding to the Bright Spots surveys who had experienced a parental bereavement is greater than the rate amongst their non care experienced peers. Some children who experienced a parental bereavement may not have had an established relationship with that

parent, but many more children in care will have experienced the trauma of the death of a parent than their non care experienced peers.

Seeing my family

Asking children about their family backgrounds and capturing the complexity of relationships in an online survey such as Bright Spots is difficult. The responses to the survey questions Bright Spots asked provided information on important elements of relationships, but the comments also shared by children illustrate just how complicated relationships can be, particularly in relation to seeing their brothers and sisters.

Younger children (4-7yrs) were not asked the questions about seeing family members but often commented on relationships with their family in response to other questions. The questions about how children felt about how often they saw their family were less relevant for those who were still living with their family. In Scotland, in 2024 around 20% of children in care were living with one or both of their parents supported by a Child Supervision Order (Scottish Government, 2025a), and this compares to just 6% of children in care in England who were living with their parents or someone else with parental responsibility (Department of Education, 2025a). Of the children who responded to the Bright Spots survey in Scotland, 20% of the children aged 8-11yrs and 13% of the older children (11-17yrs) were living with one or both of their parents, so these children were being asked to share how they felt about the amount of time they spent with someone they were living with. This also applies to their relationships with brothers and sisters, as some children will have been living with some or all of their siblings. Giving all children the opportunity to tell us how they felt about seeing their family was considered appropriate and more inclusive than seeking to only ask children about the family members that they were not living with at the time they took the survey. The findings here therefore cover all relationships with family members, regardless of whether they live together in the same household.

Scotland has a formal, legal duty of care to unaccompanied asylum-seeking children. Children who were in care in Scotland because they had come to Scotland from other countries as unaccompanied asylum-seeking children and had no family in Scotland to support them also participated in the Bright Spots surveys in Scotland. Some of these children shared that they were unable to see family who remained in their country of origin:

> *"I came to this country from [country of origin] so have no contact with my family." (11-17yrs)*

The value and appropriateness of asking questions about seeing family for this group of children requires further consideration as numbers have increased substantially in the UK since the original Bright Spots surveys were developed in 2013. Questions in isolation about seeing family could potentially be traumatising, and this group of children may be supported to stay connected with family in other ways when they cannot see their family directly.

Seeing my mum

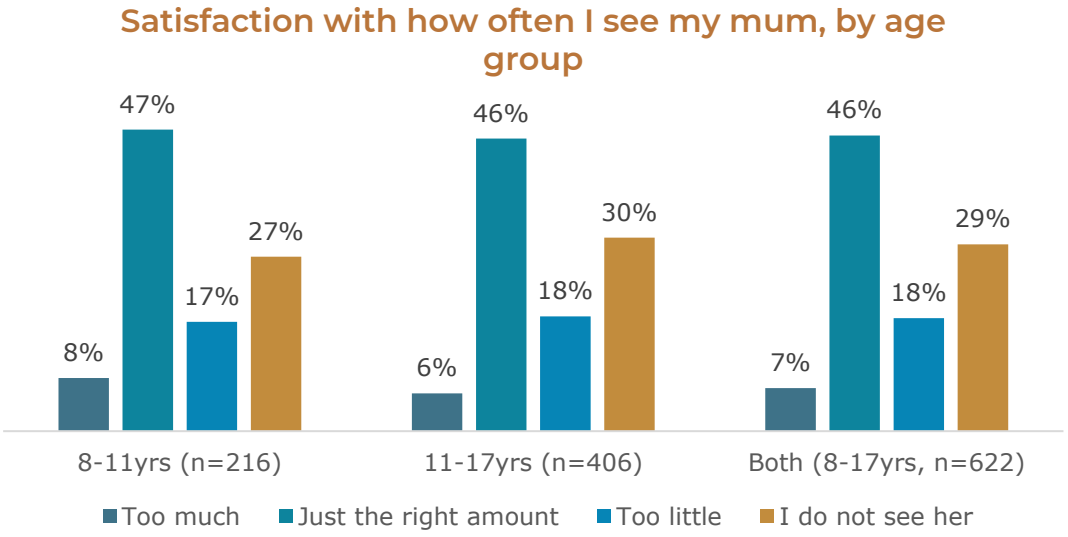


Figure 27. Satisfaction with frequency of seeing mum, by age group

Just under half of children aged 8-11yrs (47%) and older children aged 11-17yrs (46%) felt that they saw their mum just the right amount of time. Some children had enough time with their mum because they were living with them:

> *"I live with my mum and my stepdad and my brothers." (8-11yrs)*

> *"I live with my mum. I don't live with my dad and hardly get to see him, sometimes just 1 time a year." (11-17yrs)*

Other children shared that while they were not living with their mum, they felt they saw them the right amount of time, even when not meeting in person:

> *"I just see my mum on video calls. I'm ok with that." (8-11yrs)*

> *"See my mum, brother and sister the right amount of time. Do not want to see my dad again. He has had too many chances to see me and hasn't." (11-17yrs)*

18% of children of both age groups responding felt that they saw too little of their mum:

"I talk to my mum every day on the phone but I want to see her more than 3 times a week." (8-11yrs)

"I feel like I don't see my mum and dad enough because I see my mum once every 2 weeks and I see my dad when my gran chooses." (11-17yrs)

Some of the children who wanted to see more of their mum or family shared that they knew this wasn't always desirable or possible:

"I would like to see my mum more if I know she would be clean." (11-17yrs)

"I'd like to see them more but I understand why that isn't always possible." (11-17yrs)

8% of children aged 8-11yrs and 6% of older children aged 11-17yrs felt that they saw their mum too much:

"Don't see my dad enough, see my mum too much." (11-17yrs)

Around three in 10 children from both age groups did not see their mum (29%). For some, this was their own personal choice because of their past experiences:

"I can see my mum if I want to, but I choose not to." (8-11yrs)

"I chose not to see Mum, I don't have bad dreams anymore and I'm more settled here." (11-17yrs)

while other children explained why they were not currently seeing their mum, which included being prevented from seeing them and physical distance:

"I am not allowed to see my mum because it's illegal." (8-11yrs)

"Not allowed to see them." (11-17yrs)

"I don't see mom or dad, dad died and mom lives away but she sends me stuff." (8-11yrs)

Some children really wanted to be living with their mum again:

"Want to be at home living with mum. I feel that mum has made the changes to get me home however I'm still at Grandma's. Mum is the main reason I have gone back to school." (11-17yrs)

Seeing my dad

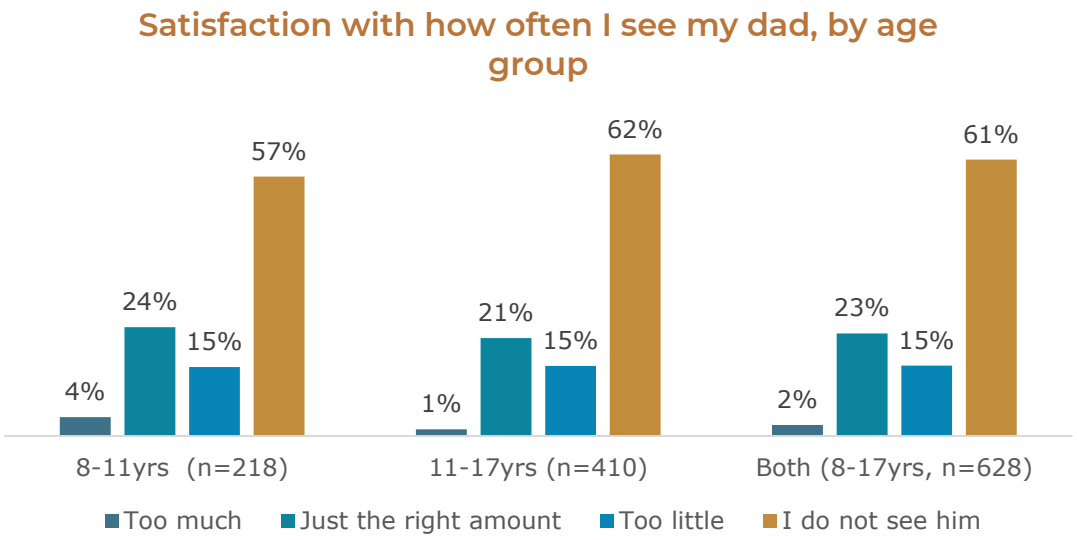


Figure 28. Satisfaction with frequency of seeing dad, by age group

Whilst three in 10 children of both age groups did not see their mum (29%), twice as many (six in 10) did not see their dad (61%). Some children felt rejected by their dads, and this was clearly painful for them:

> *"I'd like to see my Dad, have some days or visits with him. I only see him if he drives pasts me." (8-11yrs)*

> *"My dad does not see me or my brother. He does not try to see us and we feel unloved and unwanted by him." (11-17yrs)*

> *"I wish I could see my dad again. I have not seen him for 2 years. I think he has dumped us for my little brother." (8-11yrs)*

There were also children who didn't see their dad and said they were comfortable with this:

> *"I feel fine not seeing my dad." (8-11yrs)*

One child who did not see their dad in person shared that they kept in touch by writing to each other:

> *"Even though I don't see my dad, we write letters to each other." (11-17yrs)*

Just under a quarter of children of both age groups felt that they saw their dad just the right amount (22%). For some of these children this was because they were living with their dad:

> *"I stay with nana and dad." (8-11yrs)*

"I live with mum and Dad and my 4 siblings so I see them on a daily basis." (11-17yrs)

Other children responding to the survey who did not live with their dad said they were happy to see them regularly:

"I see my dad just the right amount (every second Saturday)." (8-11yrs)

One in seven of children in both age groups wanted to see their dads more (15%):

"I want more time with dad." (8-11yrs)

"I would like to see my dad more as I haven't seen him in almost two years." (11-17yrs)

Some children also shared that they wanted to develop their relationships with their dads. Disappointment was shared about when this wasn't reciprocated:

"I want to be able to talk to my dad." (11-17yrs)

"I would like to see my dad in person rather than just speaking over the phone. It's disappointing that he only wants phone contact and not to visit in person." (11-17yrs)

Several children who weren't living with their birth father, referred to their step-dads:

"I live with them. Well not dad but my stepdad." (8-11yrs)

"When my stepdad gets out of jail I would also like to see him." (11-17yrs)

Seeing my brothers and sisters

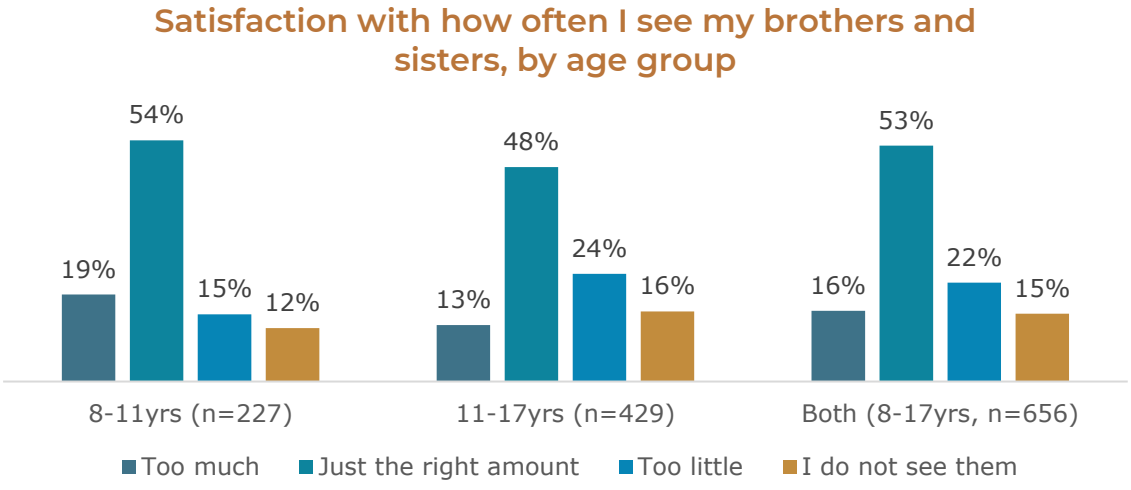


Figure 29. Satisfaction with frequency of seeing siblings, by age group

Slightly more of the younger children (8-11yrs) than the older children (11-17yrs) felt that they saw their brothers and sisters just the right amount of time (54% to 48%) and, overall, half of the children in both of the age groups were satisfied with how often they saw their brothers and sisters. Some children were living with their brothers and sisters and parents, and others lived away from their parental home but with their brothers or sisters:

> *"I see them enough because I live with them." (8-11yrs)*
>
> *"I live with my sister but I am unsure if I have any more siblings." (11-17yrs)*
>
> *"I see my sister, she lives with me and my auntie, my uncle." (11-17yrs)*

The complicated nature of families was immediately evident in the comments many of the children made about their relationships with their brothers and sisters, particularly when they had multiple siblings and saw some of them more or less frequently than they saw others. This was the case for many children who shared their experiences. This means that the percentages in Figure 29 need to be treated with caution because they do not show where the relationships with different brothers and sisters may vary.

Some children were happy with the different arrangements they had with one or more of their siblings:

> *"I speak to one of my brothers but not my sister and other brother but that's OK for now." (11-17yrs)*

One in seven children across both age groups had brothers or sisters who they did not see (15%), and a further one in five wanted to see more of their brothers or sisters (22%):

> *"My brother is the most special person… I wish I could see him more." (11-17yrs)*
>
> *"I want to see my brother. I've just moved placement and we haven't had contact yet." (11-17yrs)*

More children in the 8-11yrs age group felt that they saw too much of at least some of their siblings than felt that they saw too little of them (19% to 15%), and some older children also wanted to see less of some of their siblings (13%). Some of the comments they shared about this related to normal tensions between siblings which explain this to some degree, though it's important to acknowledge that some children will not want to see siblings for more serious reasons, such as not feeling safe with them:

"I see my little sister too much and it's really annoying, I wanna see my big sister more." (8-11yrs)

"I live with one brother, so see him too much. I haven't seen my other brother for a while, but I am OK with that." (11-17yrs)

Some comments from children who had multiple siblings highlighted different levels of satisfaction with how often they saw some of their brothers and sisters:

"I live with my sister and I see my brother every time I see my Mum. I have 6 more siblings that I would like to see more of." (8-11yrs)

"We are split up so I live with one brother and siblings live elsewhere. Don't get to see them as often as I'd like." (11-17yrs)

"I see my brother more often because they go to my school but I don't see my little sister as much." (11-17yrs)

"Like that I get see two of my siblings who I am in care with but I would like to see my other siblings as I don't get to see them. There's two I want to see more as I never get to see them anymore." (11-17yrs)

Some children did not see their brothers or sisters because these siblings had been adopted, and again complicated family relationships came through in the comments the children shared about their experiences:

"I see my older brother when I can. Don't see my little sister because they are adopted. I have letterbox set up with my sisters and mum. Don't reply to my mum." (8-11yrs)

"I have only met with my parents once but would like to see them a little bit more. I really want to see my brother more, I love spending time with them. I have met my sister, but she is adopted so I don't see her, I am no allowed to see her anymore." (11-17yrs)

Variation across local authority areas

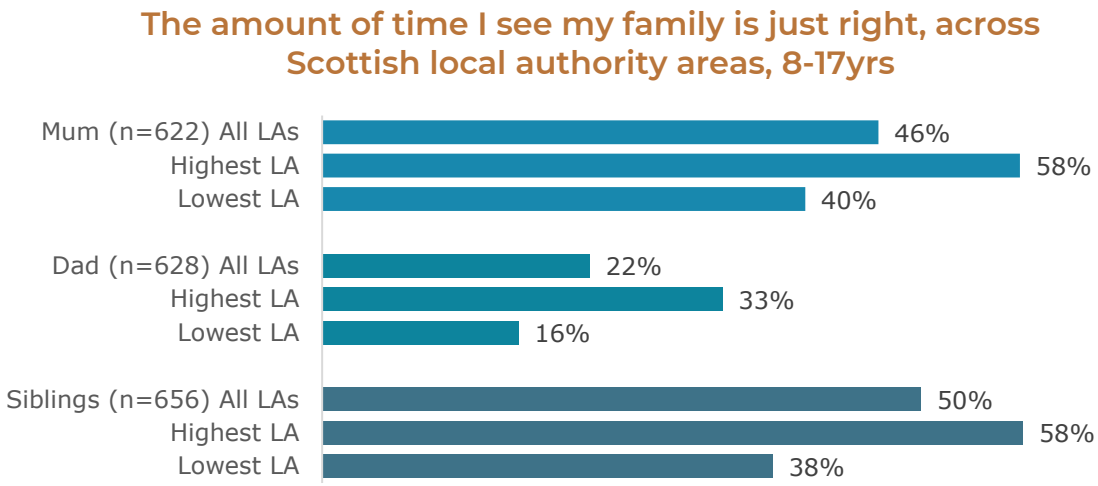


Figure 30. Amount of time seeing family is just right, by local authority area, 8-17yrs

Combining the results for children aged 8-11yrs and older children aged 11-17yrs to look at variation across the Bright Spots local authority areas in Scotland, a similar picture emerges for the children feeling that they see their mums and see their siblings just the right amount. For both age groups, this ranged from two in five children to three in five in the areas with the highest percentage. The area with the highest percentage where the children felt they were seeing their dads just the right amount was twice that of the lowest area (33% to 16%).

There could be a number of reasons for the variation that was evident across local authority areas and the Bright Spots data does not provide further insight. The extent of variation suggests that further exploration would be valuable to determine if local circumstances and practice may be making a difference.

Having pets

Relationships with pets can have an important impact on wellbeing, providing a source of comfort and reassurance for children, and sometimes can be a positive focus for children during difficult times (ONS, 2020). Relationships with pets can be particularly important for children in care, and relationships with pets can also be disrupted by changes to where children live if the pet belonged to a household rather than the child, or if the pet was the child's but they were unable to bring it with them to their new home. This can lead to feelings of loss (Muldoon & Williams, 2022).

Bright Spots asked children (8-17yrs) if they had a pet where they lived. They could answer 'Yes' or 'No'

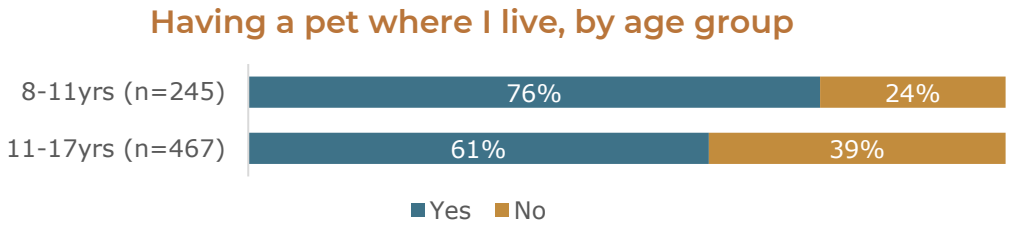


Figure 31. Having a pet where child lives, by age group

Three in four (76%) of children aged 8-11yrs had a pet where they lived, and the majority of the older children aged 11-17yrs also had a pet (61%) (Figure 31). Dogs, cats, hamsters and fish were all mentioned as being a pet:

> *"I love being at my dad's house and it's really fun because I've got a lot of family and a lot of care, and because I love my dog and I love my dad." (4-7yrs)*

> *"Holly and Ivy are my hamsters." (4-7yrs)*

> *"I like playing with the dogs and looking after the baby." (4-7yrs)*

One child wrote about being separated from their cat, and another described missing their cat since it had died:

> *"Nothing [would make being in care better] apart from if I could have my cat." (8-11yrs)*

> *"My cat died. I'm sad, I don't like it without my cat." (8-11yrs)*

In response to the open-ended question asking what would make being in care better, some of the children suggested that having a pet or another pet would improve their lives:

> *"Having my own pets cos it would literally calm me down all the time." (8-11yrs)*

> *"If I had my own dog to keep me company. I would spoil my dog." (8-11yrs)*

One child explained why they felt pets were so important for children in care:

> *"I think all young people in care should be allowed to have a pet if they want one. They help to keep you calm. It is someone that will love you*

and you will love them. A pet that you can hold is more loving, but a fish is just something you can feed, you can't do anything with it." (11-17yrs)

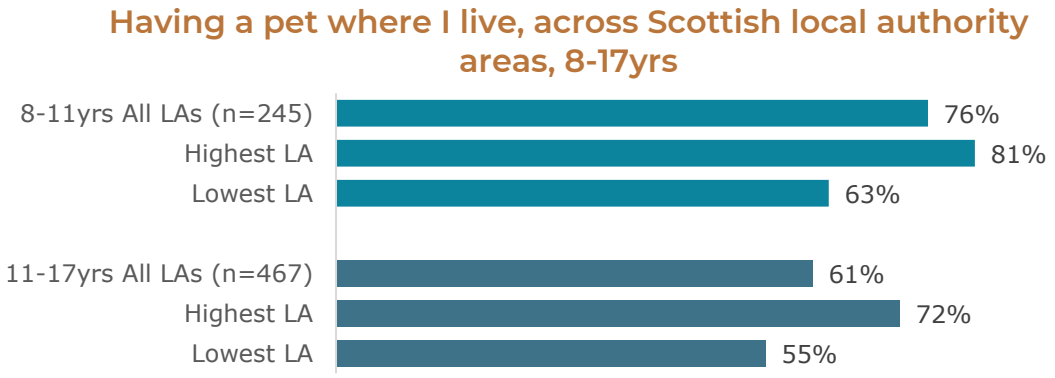


Figure 32. Having a pet where the child lives, across local authority area, 8-17yrs

The percentage of children living with a pet ranged from 63% to 76% across local authority areas for children aged 8-11yrs, and from 55% to 61% for older children aged 11-17yrs (Figure 32).

Summary – My Relationships

Relationships with the carers and adults the children I live with

- Almost all of the younger children responding to the survey had an adult they felt they could trust and trusted the people they lived with all or most of the time. As age increased however, the level of trust decreased, most notably for the 11-17yrs age group who were living in residential child care. Older children were also more likely to report that adults didn't notice how they were feeling, and they felt they didn't talk to adults as often about things that mattered to them. Children living with foster carers were more likely to indicate that the adults they lived with noticed how they were feeling.

Having a good friend

- Nine in 10 children across all the age groups did have a really good friend, but those living in residential child care were less likely to have one. Children living in residential child care were also less likely than children who were living with their parents or with wider family and friends to have the chance to do similar things as their friends.

Family relationships

- Comments from the children described and reflected complicated family situations and complex feelings about their relationships with other family members which can otherwise be masked by the answers to the simple questions they were asked.
- Relationships were particularly complex for children who had multiple brothers and sisters, with many of the children seeing some but not all of their siblings. Some children were happy with the arrangements, some wanted to see more of some of their brothers and sisters, and other children wanted to see less of some of their brothers and sisters.
- There was considerable variation across local authority areas for the proportion of children aged 8-11yrs and 11-17yrs who felt that they saw their mums, dads and/or their siblings just the right amount of time.

- Under a quarter of the children aged 8-17yrs responding to the Bright Spots survey felt that they spent just the right amount of time with their dads.
- Three in 10 children aged 8-17yrs did not see their mum, and 6 in 10 did not see their dad.
- One in 5 children aged 8-17yrs had experienced the death of one or both of their parents, a rate that appears to be far in excess of that for the general population.

Access to the internet

- Most of the children who responded to the survey were generally well connected digitally, with the majority having access to the internet where they lived.

Having a pet

- Three quarters of children aged 8-11yrs had a pet where they lived, as did three in five of the older children (61%, 11-17yrs).

Being in care



Being in care

Growing up in care can feel and be different to the experiences children who do not grow up in care have. Some children in care can experience stigma because they feel they are treated differently to their peers who are not in care. Children in care in Scotland are assigned a social worker who will be present in their lives to help make sure they are safe and supported. Having positive relationships with social workers is vital for children's wellbeing because these practitioners are responsible for helping children to understand what is happening in their lives and supporting them to be meaningfully involved in decisions being made about their lives and care.

Relationship with social workers

Children were asked a set of questions about their relationship with their social worker but they weren't specifically asked to write comments about their relationship with their social worker. However, 57 children (4-17yrs) shared information about their relationship with their social worker in their responses to other questions. Six of the youngest children (4-7yrs), 11 of the children aged 8-11yrs, and 40 of the older children (11-17yrs) wanted to tell us more about their relationship with their social worker in what they shared through the surveys.

Knowing the identity of my social worker

Social workers can play a crucial role in enabling children in care to contribute to key decisions that are being made in their lives by providing them with information and support to help them understand their rights when these decisions are being made. It is through these important relationships that children are encouraged to speak up, share what they think, and help shape the decisions which affect them.

The Getting It Right for Looked After Children and Young People strategy (Scottish Government, 2015) emphasises the importance of children and young people in care being given the opportunity to build strong relationships with the people who are important in their lives, including their social workers.

Bright Spots asked all the children (4-17yrs) if they knew who their social worker was. They could choose 'Yes' or 'No'.

Most of the children knew who their social worker was, but one in three of the youngest children (4-7yrs) did not (Figure 33).

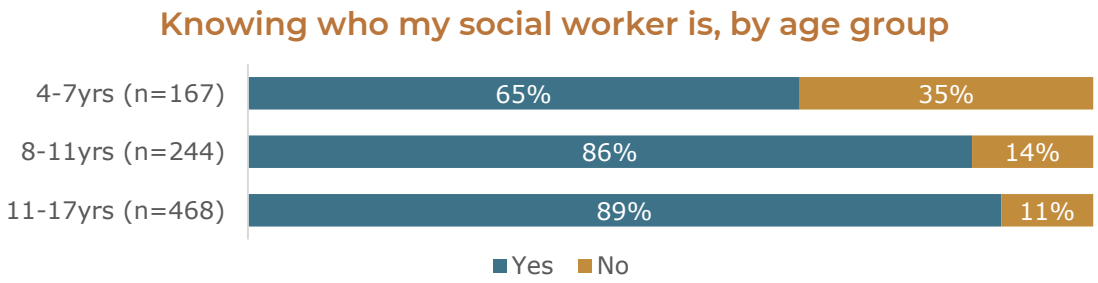


Figure 33. Knowing their social worker, by age group

A small number of children shared that they did not know who their social worker was because they did not have a social worker at the moment or their social worker had changed and they had not yet met their new social worker. Some children had mistaken another practitioner who visited their home as being their social worker.

> *"Social worker has changed, not met my new social worker." (11-17yrs)*

> *"I don't have a social worker for myself…" (11-17yrs)*

The proportion of children answering the survey who knew who their social worker was increased with age, from two thirds of 4-7 year-olds (65%) to almost nine in ten 11-17 year-olds (89%).

Feedback from the Scottish local authorities participating in Bright Spots indicated that some younger children living with their parents or with wider family or friends were not aware that they were in care and for that reason, they may not have been aware that they had a social worker. This could also explain why the 65% of the youngest children (4-7yrs) who knew their social worker was well below the 78% for the Bright Spots comparator group and, at 86%, the percentage of children aged 8-11yrs who knew their social worker was below the 91% for the comparator group, with the gap reducing for older children aged 11-17yrs (89% to 92%).

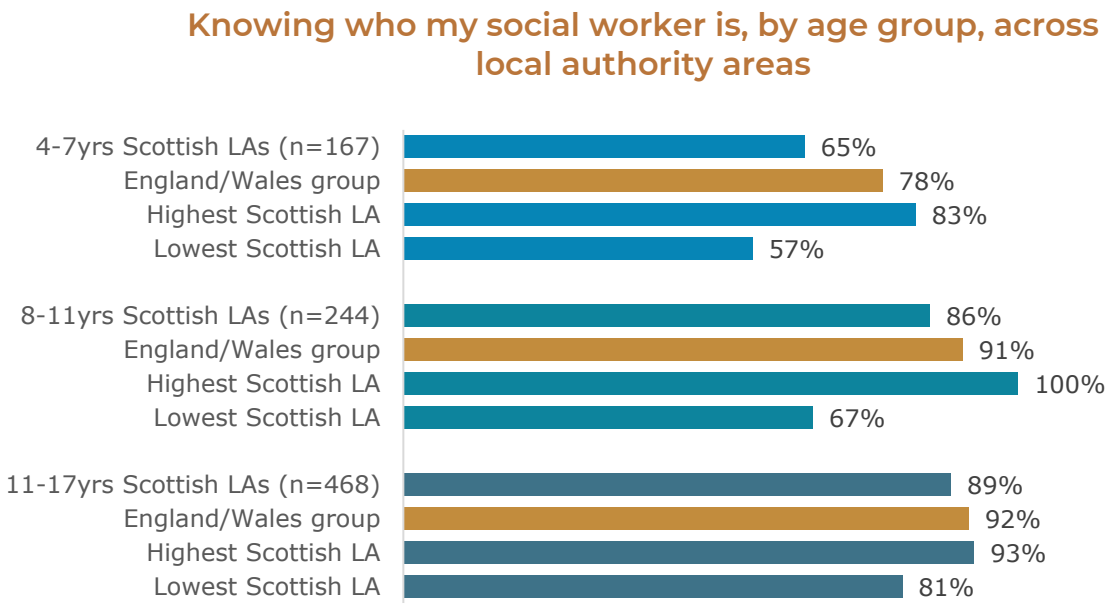


Figure 34. Knowing their social worker, by age group, across local authority areas

Substantial variation was evident across the local authority areas for the youngest children (4-7yrs, 57% to 83%) and children aged 8-11yrs (67% to 100%) (Figure 34). The range for the oldest children (11-17yrs) was not as pronounced (81% to 93%).

Trusting social workers

Children and young people who were involved in developing the Bright Spots surveys identified that having trusting relationships with their social workers was one of the main factors which were important to them (Wood & Selwyn, 2017).

Bright Spots asked of the children who knew their social worker, 'Do you trust the social worker you have now? The youngest children (4-7yrs) could choose 'Yes' or 'No'; and the older children (8-17yrs) could choose from 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'.

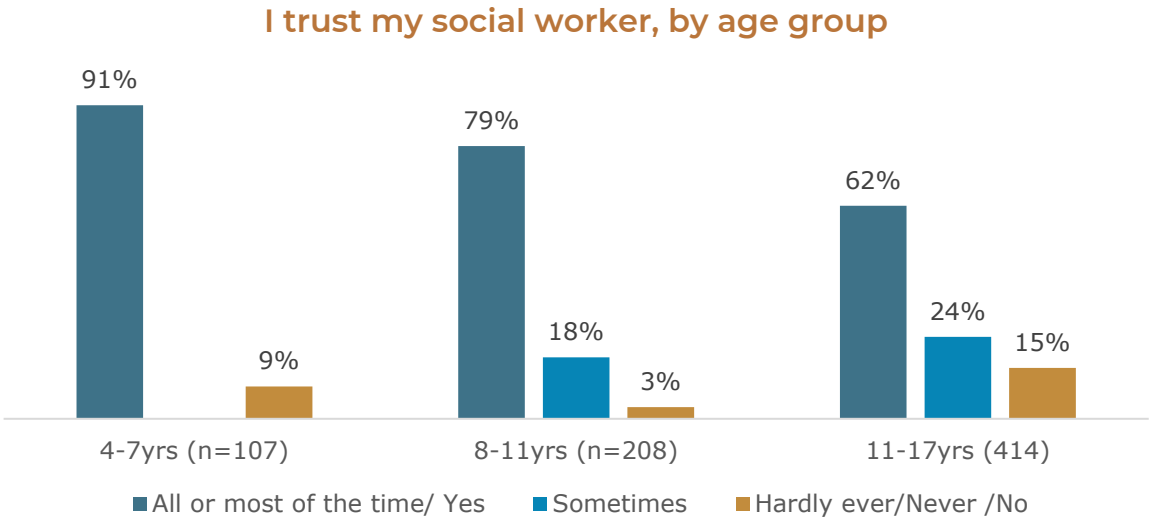


Figure 35. Trusting their social worker, by age group

The majority of children of all ages (4-17yrs) said that they trusted their social worker (Figure 35). A few children left comments in their responses to other questions that help explain why they trusted their social worker. They told us that they liked or were happy with their social worker, felt they could talk to their social worker about what was happening in their life, trusted their social worker even when their family members sometimes do not, or liked travelling with their social worker to see their family members:

> *"I like my social worker." (4-7yrs)*
>
> *"Our social worker is going to find out more and work on a family tree." (8-11yrs)*
>
> *"I feel that I can talk to my social worker…" (11-17yrs)*
>
> *"I trust my social worker but my whole family don't trust them, just sometime [sic]." (11-17yrs)*

However, trust in their social worker was lower for older children (11-17yrs), with one in six responding that they 'hardly ever/never' trusted their social worker and some children (4-17yrs) left comments in their responses to other questions that may provide insights into why they 'hardly ever/never' trusted their social worker.

For example, some of the older children were unhappy with the support they received from their social worker. Some also told us they had difficulty communicating with their social worker, that their social worker took too long to respond or did not provide them with access to appropriate support, would

sometimes turn up unexpectedly, did not visit when they said they would, or they would not hear from their social worker for weeks or at all:

> *"I don't like the social workers I worked with. One took me off my mum, came at random times. Some [were] not easy to talk to, but my social worker now is." (11-17yrs)*

> *"I had to ask Social Work about mental health support, but they didn't care if I could access it or if they had turned up and they didn't turn up a lot, I was made to feel stupid and that it was all my fault." (11-17yrs)*

A few children held their social worker responsible for removing them from their parent's care; said their social worker did not explain why they could not stay overnight with their parent; or felt their social worker did not listen to them or involve them in decisions about their life:

> *"I don't like my social worker, she's all right but she's not the best. She used a grumpy voice with me when I asked if I could get sleepovers with my dad. She said not anytime soon so I haven't liked her since then." (8-11yrs)*

Other children felt their social worker did not treat them with respect, did not make an effort to bond with them, made promises they didn't keep, told lies or would say something and then later deny they had, or that their social worker would interfere in their lives too much:

> *"…[Social worker] tells lies all the time." (4-7years)*

> *"My social worker hasn't put in the effort to make a bond with me. In the past my social workers did, so I could trust them… She told me to call her if I had a problem but when I do, she doesn't respond." (11-17yrs)*

For older children (11-17yrs), a higher proportion of those being cared for by foster carers trusted their social worker compared to children living in other circumstances, and a higher proportion of children who had only had one social worker trusted their social worker compared to those who had experienced a change of social worker, with trust decreasing as the number of social workers a child had increased. It was clear from what they shared that the children who felt they were listened to when decisions were made about their lives were more likely to trust their social worker.

Change of social worker

Maintaining relationships and building trust is challenging when social workers frequently change. A change of social worker is not included in national data

collected about care experience of children in Scotland, but the UK Government in 2025 reported that 27% of 'looked after' children in England had experienced three or more changes of social worker in the previous 12 months (Department for Education, 2025b).

The most significant challenge in building trusting relationships between practitioners and the children and families they support cited in Scotland's Children's Services Reform Research study (McTier et al., 2023; Ottaway et al., 2023) was the lack of consistency and continuity of these relationships. Contributing factors included high staff turnover, high rates of sickness absence, and staff being employed on short fixed-term contracts.

Bright Spots asked the older children (11-17yrs) how many social workers they had had in the last 12 months. They could choose to answer 'None', 'One', 'Two', or 'Three or more'.

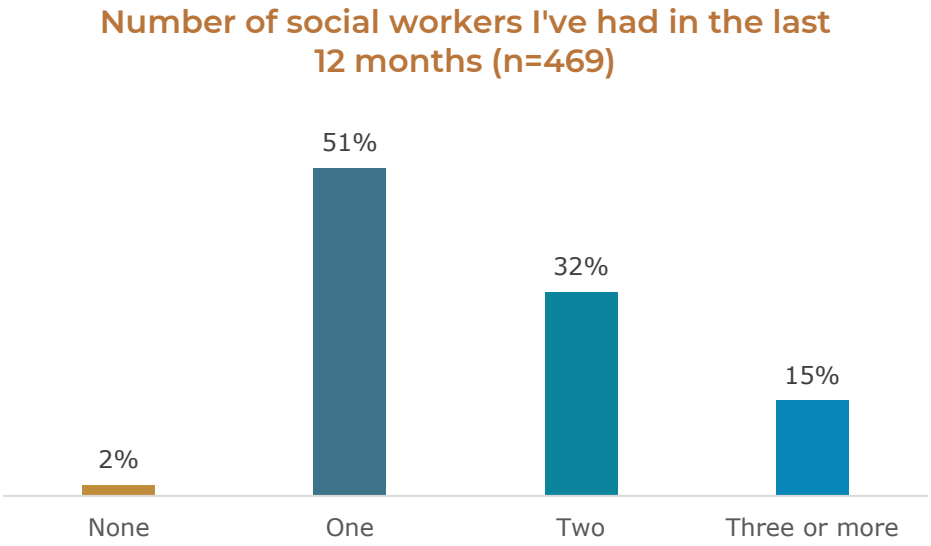


Figure 36. Number of social workers in the last 12 months

One in every seven of the older children (15%) who responded to the survey had three or more social workers in the previous year. This is a much lower proportion than the one in four children (27%) in England and Wales.

Just over half (51%) of the older children (11-17yrs) had the same social worker for the last 12 months (see Figure 36).

A small number of the children (11-17yrs) shared comments about their experience of changing social workers in their responses to other questions. They wrote that they have had a lot of, or too many, social workers over the

years, that having changes of social worker meant they needed to tell their story repeatedly, and that having a consistent social worker would make being in care better for them:

> *"I have had too many social workers; need to tell my story time and time again." (11-17yrs)*
>
> *"I have had a lot of different social workers over the last few years." (11-17yrs)*
>
> *"A consistent social worker [would make being in care better]." (11-17yrs)*

Seeing my social worker

Some of the older children (8-17 years) also left comments in their answers to other questions that related to seeing their social worker.

Some children wanted to see or hear from their social worker more often and explained that they also wanted their social worker to be more attentive, to ask them how they are feeling more often, to speak to them more about their life, and to sometimes see them on their own without other family members present:

> *"Social work could do a better job at actually visiting us more often, we haven't seen them in ages, they could also organise meetings in a better fashion." (11-17yrs)*
>
> *"I'd like to be asked more about how I am feeling either by social workers or family." (11-17yrs)*

Other children wanted to see their social worker less often, for example, when they were feeling safe at home, and a small number felt they did not want to have a social worker at all:

> *"It would be nice to be able to see social workers less often." (11-17yrs)*
>
> *"Maybe for the social work to stop coming out all the time because I am safe at my house." (8-11yrs)*
>
> *"Social work not being around me as much and having a say in everything I do." (11-17yrs)*

Children have the right to see their social worker on their own.

Bright Spots asked children (8-17yrs) if they knew that they could ask to speak to their social worker on their own. They could choose: 'Yes, I do know this' or 'No, I don't know this'.

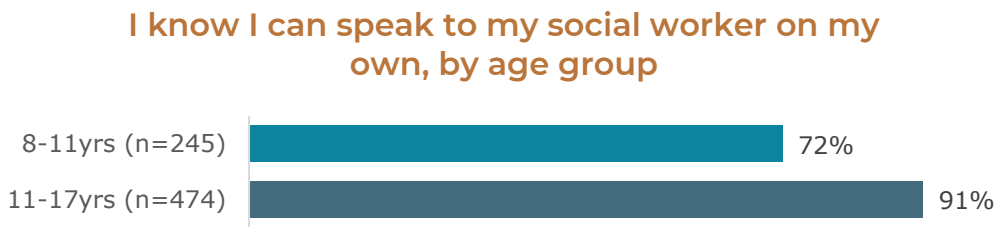


Figure 37. Child knows they can speak to their social worker on their own, by age group

Most of the children knew that they could speak to their social worker on their own, but the percentage was much higher for older children (11-17yrs) than it was for children who were 8-11 years of age (91% to 72%, Figure 37).

Bright Spots asked the older children (11-17yrs) who knew their social worker if it was easy to get in touch with their social worker. They could choose 'All or most the time', 'Sometimes', 'Hardly ever' or 'Never'.

Half of these children (52%) found it easy to get in touch with their social worker all or most of the time, and 15% said they hardly ever or never found it easy to do so (Figure 38).

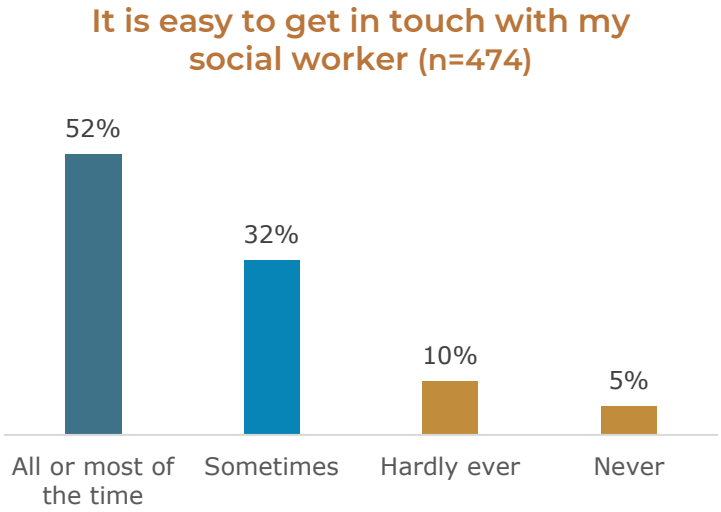


Figure 38. Ease of getting in touch with their social worker

A small number of the older children (11-17yrs) also left comments about the difficulty they experienced in contacting their social worker. They wrote that

their social worker would either be slow to respond or would not respond at all. One thought the reason for their social worker's delayed response was that social workers were very busy in general. Another used the survey to ask how they could get in touch with their social worker:

> *"My Social Worker never answers." (11-17yrs)*
>
> *"When I sent a message to my social worker saying how bad I felt, I got no reply and no help, she asked if I got help but that was weeks later. Did not keep promises about support when I said I needed it." (11-17yrs)*
>
> *"I would like my social worker to visit when she says she will than not hear anything from her in weeks." (11-17yrs)*
>
> *"How do I get in touch with my social worker?" (11-17yrs)*

Understanding the reasons for being in care

Previous research by Staines and Selwyn (2020) has highlighted that having a good understanding of the reasons for being in care is important for children's wellbeing, self-esteem, and identity. Understanding the reasons for being in care can help children and young people to feel more secure, wanted, and to not carry personal responsibility for being in care (Coram Voice, 2019). It is also known that understanding the reasons for being in care can also help children and young people living with wider family and friends in kinship care to understand and come to terms with not being able to live with their parents (Aldgate & McIntosh, 2006).

Bright Spots asked children of all ages (4-17yrs) if an adult had explained to them why they were in care. They could choose 'Yes, I know all I want to', 'Yes, but I'd like to know more', or 'No'.

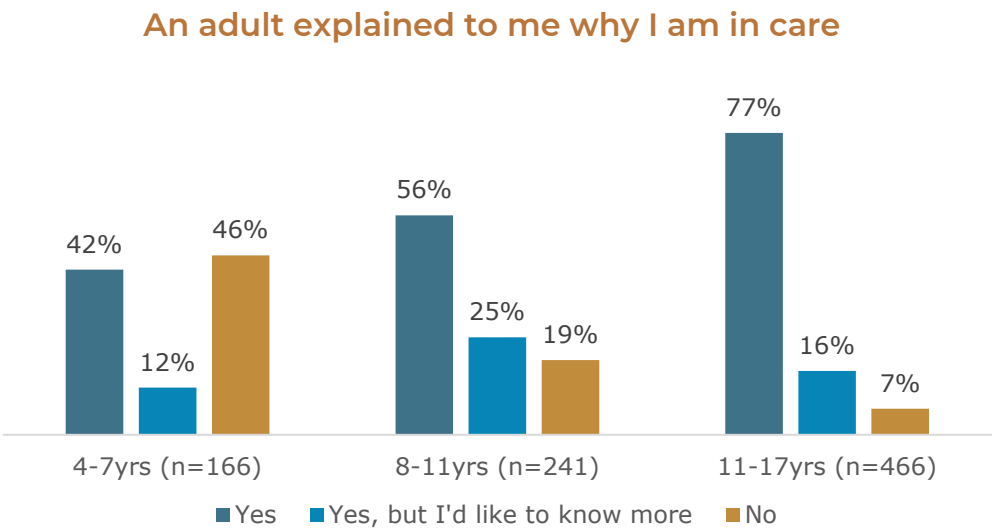


Figure 39. Adult explained why the child was in care

The older children (11-17yrs) who responded were more likely to have had a full explanation of why they were in care than both younger age groups (Figure 39), and there was a clear association between age and having received a full explanation which was statistically significant.

A few of the children provided comments about wanting to understand why they were in care and what the plans were for their future, when they were responding to other questions in the survey. Their comments ranged from wanting to understand why they now live in foster care, to understanding why they left their foster carers, to wanting to know more about their birth family and whether meeting them would be an option in the future:

> *"I would like to know some more about my family. I want to know more about why I live in foster care." (8-11yrs)*

> *"I want to know why I left my other foster carers." (8-11yrs)*

> *"Always had thoughts about meeting up with birth family, but not entirely sure of the situation." (11-17yrs)*

One older child living with wider family of friends did not recognise that they were formally in care even though they were aware that a Compulsory Supervision Order was in place:

> *"I'm not in care I'm on a CSO." (11-17yrs)*

Over two thirds (67%) of the children who knew who their social worker was felt that they had received a full explanation of why they were being cared for, compared to 55% of children who did not know who their social worker was.

For older children (11-17yrs), those who had not experienced a move to another place of care were more likely to feel they had received a full explanation (85%) than those who had moved up to three times (77%), and children who had moved four or more times (65%).

Almost one in four (23%) older children (11-17yrs) felt that either no one had explained why they were in care, or they wanted to know more. This was 44% of 8-11-year-olds, and 58% for the youngest children (4-7yrs), with almost half of the youngest children (4-7yrs) feeling that why they were in care had not been explained to them (46%). This, coupled with a third who did not know who their social worker was (35%), suggests that some of these younger children had a limited understanding of their circumstances. Local authority partners participating in the Bright Spots programme pilot in Scotland reported that some of the youngest children were not aware that they were in care because they were living with their parents or wider family, and therefore they raised the appropriateness of some of the survey questions for children living in these circumstances.

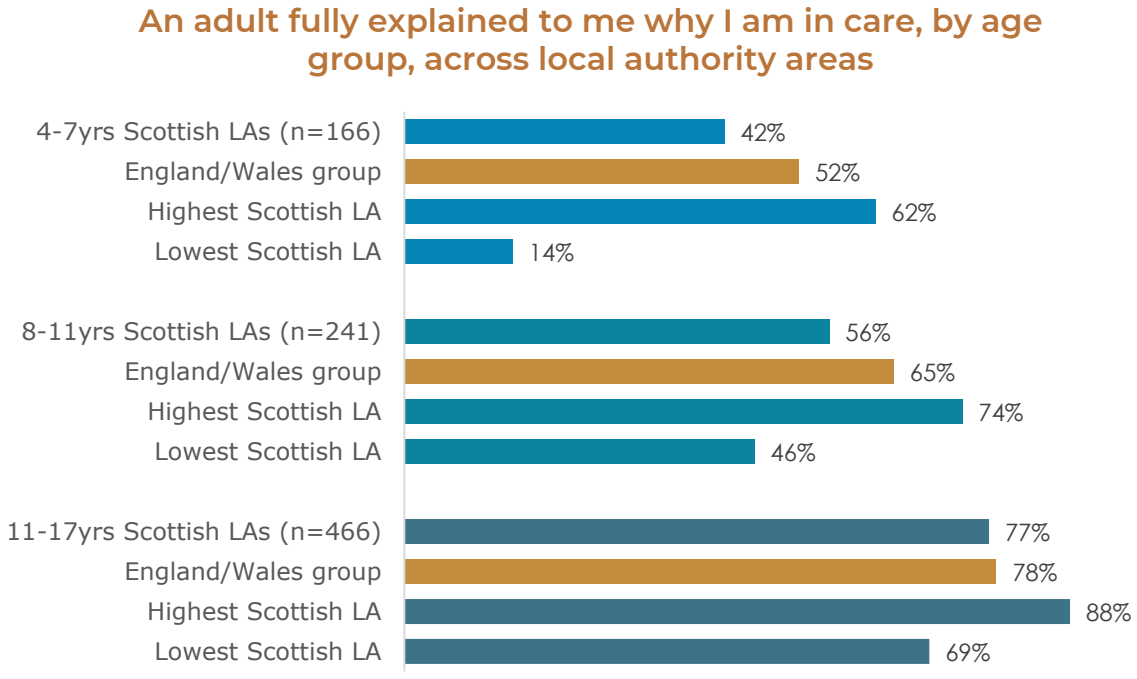


Figure 40. An adult fully explained to the child why they were in care, by age group, across local authority areas

Variation across the Bright Spots Scotland pilot areas was particularly evident and was most pronounced for the youngest children (4-7yrs), ranging from a high of 62% down to just 14%, though small numbers of children in this age group in some areas mean that percentages should be treated with some

caution. There was also considerable variation for children aged 8-11yrs. The percentages for both these younger age groups were also significantly below those for the Bright Spots comparator group in England and Wales. The higher proportion of children in care in Scotland who were living with their parents with a Compulsory Supervision Order in place may help explain this difference, as some of these children were not aware that they were in care and did not realise that they had a social worker.

Voice and involvement in decision-making

Voice is one of five foundations on which The Promise of the Independent Care Review (2020a) in Scotland was built. The Promise (Independent Care Review, 2020a) states that children must be listened to and be meaningfully and appropriately involved when decisions are made about their care. This is in line with Article 12 of the United Nations Convention of the Rights of the Child (UNCRC) (1989) which states that children and young people have the right to be listened to and taken seriously, and this right is explicitly recognised in Scotland through The United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024 (Scottish Parliament, 2024).

In previous Bright Spots' surveys in England, Coram Voice asked children if they felt included in the decisions social workers made about their lives, and this question was changed for the Scottish pilot surveys to reflect the multi-agency nature of decision making in Scotland:

> Bright Spots asked children (8-17yrs) if they felt listened to when decisions are made about their life. They could choose: 'All or most the time', 'Sometimes', 'Hardly ever' or 'Never'.

Most of the children aged 8-17yrs (87%) felt listened to when decisions were made about their lives at least 'sometimes' (Figure 41). However, around 1 in 8 'hardly ever' or 'never' felt they had been listened to.

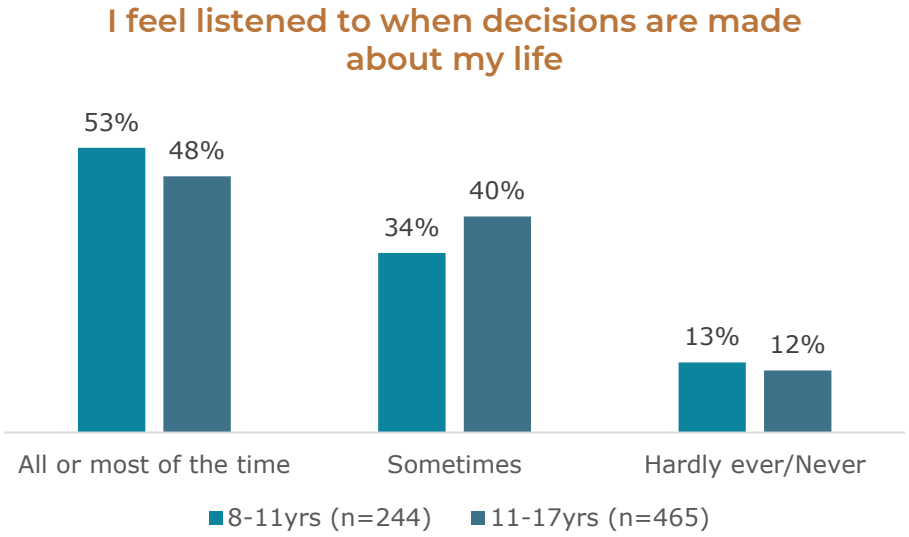


Figure 41. The child felt listened to when decisions were made about their life

For both age groups combined (8-17yrs), the local authority area with the highest percentage of children who said they hardly ever or never felt listened to when decisions were made about their lives was three times higher than the area with the lowest percentage (Figure 42, 22% to 7%)

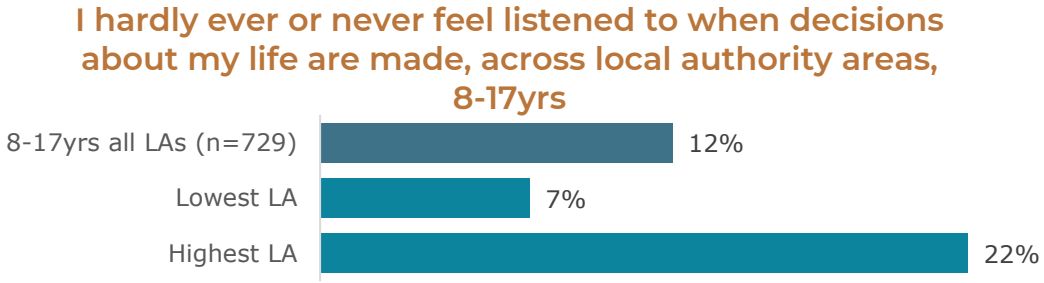


Figure 42. The child hardly ever or never felt listened to when decisions were made about their life, 8-17yrs

In a follow-up question, Bright Spots asked the older children (11-17yrs) if there was anything else they wanted to say about feeling listened to.

This question prompted a wide variety of comments with different themes.

Some said they felt particularly listened to when they had something important to say and that their views were taken seriously, albeit that they noted it can take time for decisions to be actioned. They also said that some of the adults who support them are good listeners, for example, carers, guidance teachers or support staff:

"I feel like adults listen to what I have to say and what's important to me." (11-17yrs)

"I know that people take me seriously and listen to me." (11-17yrs)

"I feel people listen to my decisions, however I feel they take time to happen." (11-17yrs)

"The adults who support me are good listeners." (11-17yrs)

"I prefer speaking to my guidance teacher. They are great at [school name]." (11-17yrs)

Other children (11-17yrs) felt that they should be listened to more by their family, school, and/or social worker. They felt that sometimes their decisions and what they want for their lives were either being ignored or only actioned when the adults agreed with their decisions. They said that sometimes they need to "have a go" at the adults in their life in order to have their views listened to, and wished that adults took time to listen to them and understand them and their wishes better:

"Again, I wished people listened to me more. I wish people understood me better." (11-17yrs)

"Sometime [sic] but if they don't listen to me I normally have a go at them so that they do and it works, also they need their ears checked." (11-17yrs)

"I think I am listened to, to an extent. I think that most of the time I'm listened to, it's only if they agree with what I'm saying and want to act on it, however I feel that when they don't agree they choose to not act on it and don't listen to me if I bring it up again." (11-17yrs)

"Decisions are sometimes put in place and I don't get a word in." (11-17yrs)

Several young people (11-17rs) felt their views about their individual needs were not taken seriously: this included their views about their gender identity, mental health or emotional support needs, for example, being unable to receive counselling, despite repeated requests. They also sometimes met financial stumbling blocks in relation to their practical needs:

"I have constantly asked for things and nothing has happened, for years my fosters carers have fought to get me counselling and got nowhere." (11-17yrs)

> *"They ask what you want but they don't do anything. I need a new bed and a jacket as it is cold. A boy I live with gave me a jacket. My social worker says there is no money." (11-17yrs)*

Some of the older children (11-17yrs) also shared that their views and behaviour were either being misunderstood or misrepresented. This included feeling like their words were twisted in meetings, not feeling like they can give their views when asked due to being ignored in the past, and feeling like they need to agree to things when they do not want to:

> *"I feel that my words have been twisted when they are talked about in meetings." (11-17yrs)*

> *"In the past I felt I wasn't listened to so now I just say I don't know when I'm asked." (11-17yrs)*

> *"If I want to say no I feel like I have to say yes anyway." (11-17yrs)*

A lack of control over important decisions being made about their lives was also shared. This included over where they would like to live, about having to move from where they live when they are 18 even though they do not want to, not knowing what is happening in their life now or in the future, and being the last to know what is happening in their life:

> *"I feel my voice hasn't been listened to with regards to where I want to live." (11-17yrs)*

> *"I do not believe I meet Secure criteria and professionals need to understand I have to be allowed to take my own risks." (11-17yrs)*

> *"Sometimes they don't tell me things or I'm the last known [sic]." (11-17yrs)*

> *"I've been told I need to move after I'm 18, even though I don't want to, so I don't think anyone cares about what I think." (11-17yrs)*

> *"I feel like children in care aren't involved enough in the decisions made about them." (11-17yrs)*

> *"I want things explained to me more about my future." (11-17yrs)*

Stigma, privacy, and discrimination

Children and young people told Scotland's Independent Care Review that "language can compound a sense of being different, exacerbate low self-esteem and is stigmatising" (COSLA et al., 2024, p.4).

Article 2 of the UNCRC (1989) states that every child has a right not to be discriminated against and that appropriate measures should be taken to ensure that children are protected against all forms of discrimination. Article 16 of the UNCRC (1989) also states that every child also has the right to keep aspects about their life private.

The inclusion of a question on stigma in the Bright Spots surveys was important to the children and young people who helped develop the surveys and a response to the experiences of children and young people in care. The Bright Spots surveys in England and Wales found that that "being singled out, being stereotyped and treated differently is an ongoing issue for both children in care and care leavers" (Coram Voice, 2020, p.1).

The Bright Spots survey in the Scottish pilot asked the older children (11-17yrs) if adults did things that made them feel embarrassed about being in care. They could answer 'Yes' or 'No'.

One in seven young people (14%) felt that adults had done things to make them feel embarrassed about being in care. The children living in residential child care who answered the survey were most likely to say they had been embarrassed by adults than those living elsewhere (17%), with children living with their parents having the lowest percentage (7%, Figure 43).

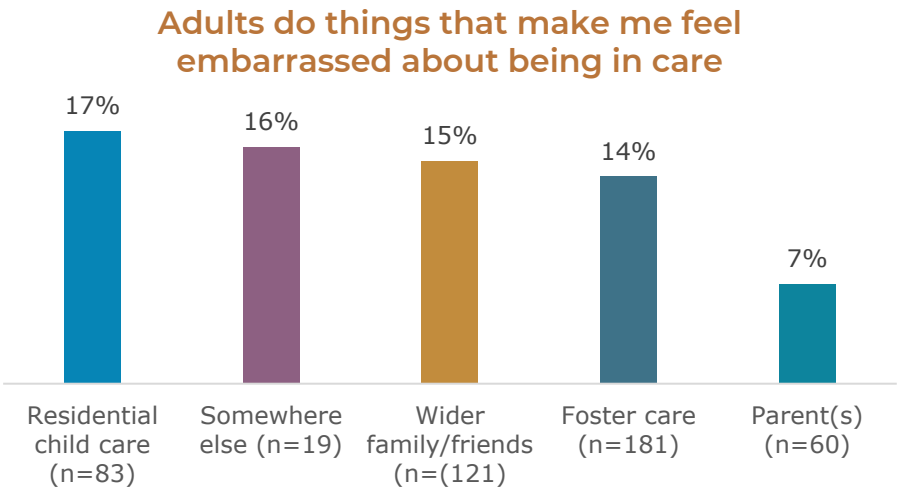


Figure 43. Adults did things that made the child feel embarrassed about being in care

Across all of the six local authorities areas taking part in the pilot, the proportion of the older children who responded who said they were made to feel embarrassed about being in care ranged from one in four (25%) to one in 16 (6%), with the combined percentage for all authorities very similar to that for the Bright Spots comparator group (Figure 44).

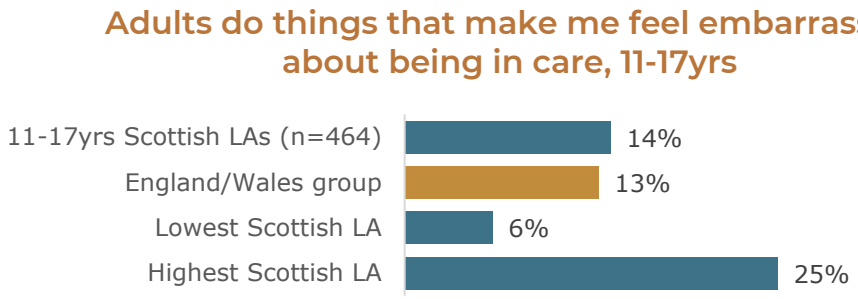


Figure 44. Adults did things that made the child feel embarrassed about being in care, 11-17yrs

In a follow-up question, the children (11-17yrs) were asked to explain what it was that adults did that made them feel embarrassed about being in care.

Some children said that it was sometimes the way that adults spoke to them or about them in public that made them feel embarrassed. This included adults talking about them being in care in public, people seeing them out and about with other children from residential child care, being talked about as if they were not there, jokes being made about their care status, telling other people about them being in care, and talking about their care status too much or it being mentioned at the 'wrong time':

> *"Talking about me being in care in public, people seeing me with other kids from the home and wondering who they are." (11-17yrs)*
>
> *"A teacher made a joke about me being in care the other day, she said I probably see you more than your mum." (11-17yrs)*
>
> *"They tell other people." (11-17yrs)*
>
> *"They talk about it too much." (11-17yrs)*
>
> *"Social worker makes me feel embarrassed, I don't like her." (11-17yrs)*

As well as what they said, the actions of adults could also make older children (11-17yrs) feel embarrassed about being in care. This included: the wearing of workplace lanyards and id badges when out in public with them; carers

correcting people when people mistake them for the child's 'parent' and instead explain that the child is in care; staff not being discreet about the child's care status; different staff members supporting them to appointments on different occasions, for example, the hairdressers; the awkwardness of it looking like the child is asking multiple different people to buy things for them; monitoring and interrupting their phone calls; seeking discounts at the cinema by declaring they are the child's carer, or beeping the horn when picking them up from school:

> *"In public and people come up to the carer and look at you funny and the carer explains that you are in care, or when people call the carer "parents" and carer corrects them." (11-17yrs)*
>
> *"I feel as though staff sometimes make it too obvious to other parents that I'm in care, which makes me seem like a troubled teen and a bad example." (11-17yrs)*
>
> *"People wear lanyards when they are with you." (11-17yrs)*
>
> *"Like going to the cinema and they say "I'm their carer" to get discount." (11-17yrs)*

Being treated differently to other children was also raised and included examples of being blamed for things that happen or treated differently than their friends, having social workers visit when other children do not have that experience, and having workers makes them stand out from other children:

> *"Everything I do is recorded and I feel like I live under a microscope." (11-17yrs)*
>
> *"Having workers work with me can be embarrassing when I'm at school as it can be too obvious and makes me different from other kids." (11-17yrs)*
>
> *"I always get the blame when something happens and [they] treat me different from my pals." (11-17yrs).*
>
> *"Having to have a social worker come visit, other kids don't have to do that." (11-17yrs)*

Summary - Being in Care

Relationships with social workers

- The majority of children (4-17yrs) trusted their social worker. Older children had less trust in their social worker than younger children.
- Just over half (51%) of young people (11-17yrs) had the same social worker for the last 12 months, and one in six had three or more social workers.
- Knowing who their social worker was also related to age: while most children knew who their social worker was, over a third of the youngest children (4-7yrs) did not.
- Some children commented about the difficulty of getting in touch with their social worker and felt that their social workers were unresponsive or unavailable.

Reasons for being in care explained

- Almost half of the youngest age group (4-7yrs) did not feel that why they were in care had been fully explained to them. Understanding the reasons for being in care increased with age, but more than one in five young people (11-17yrs) felt that either no one had explained why they were in care, or they wanted to know more.

Voice and involvement in decision-making

- Around half of the children who responded to the survey said that they always felt listened to when decisions were made about their lives, but many provided comments which showed they did not feel in control of important decisions, they were not being listened to, or their views were not being taken seriously.

Stigma, privacy and discrimination

- The older children (11-17yrs) were asked if adults did things that made them feel embarrassed about being in care. 14% said they did and gave examples including not being in control of what was said about them in public or to whom, with their privacy not respected, confidentiality breached, and they felt were treated differently from their friends. Some also felt they were discriminated against because of their care experienced.

Daily life



Daily life

Feeling safe settled and secure in their home and the area they live in contributes to children's sense of wellbeing. Children also benefit from having opportunities to have fun and take part in activities and hobbies and to be outdoors in nature. Experiences at school can have a particularly strong influence on wellbeing, and some children taking part in the Bright Spots pilot in Scotland will also be studying at college and university, which again can have a significant impact on how they feel about their lives.

Feelings about where children were living

Increasing attention is being given to the national housing emergency in Scotland, a crisis being experienced across the rest of the UK too, and the impact that this is having on the rights and experiences of children, young people and their families. The Scottish Government recognises that having a home which is safe, in a positive neighbourhood, with enough space to play and develop is important for children and young people's health and wellbeing (Scottish Government, 2021b).

Feeling safe

The UNCRC (1989) sets out children's rights, including children's right to be safe. In 2024, the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act incorporated the UNCRC into Scots Law (Scottish Parliament, 2024). Prior to this, Scotland's Getting It Right For Every Child (GIRFEC) approach set out that ensuring that all children "grow up in an environment where a child or young person feels secure, nurtured, listened to and enabled to develop to their full potential" is essential to children's wellbeing (Scottish Government, 2022, p.9). Understanding children and young people's feelings about their safety at home and what makes them feel safe or unsafe helps to better understand their overall wellbeing.

Bright Spots asked all the children if they felt safe where they lived. The youngest children (4-7yrs) were given two options: 'Yes, always' and 'No, not always', while older children (8-17yrs) could respond 'Always', 'Sometimes', 'Hardly ever' or 'Never'.

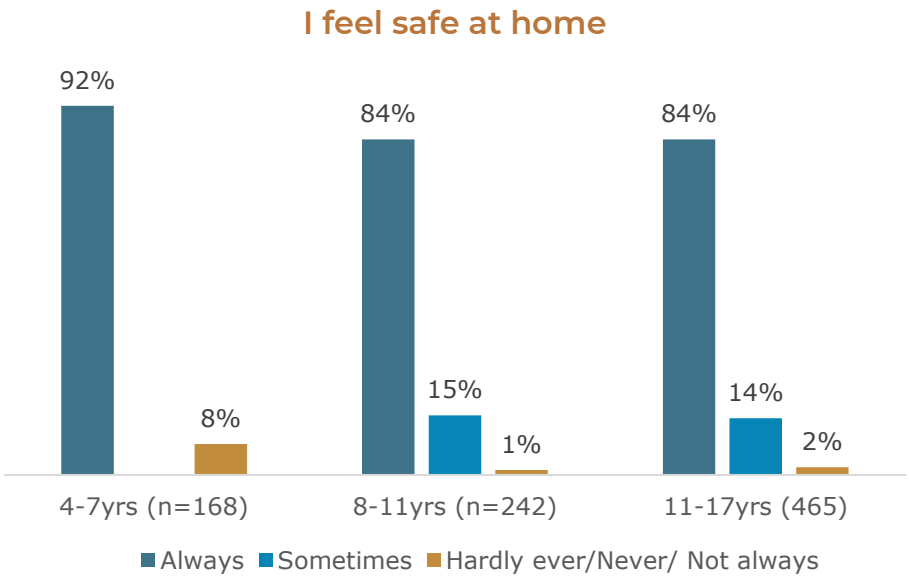


Figure 45. Feeling safe at home

Over nine in 10 of the youngest children (92%, 4-7yrs) always felt safe where they lived, and five in six of the children aged 8 and over always felt safe where they lived (84%). 8% of the youngest children did not always feel safe, and 1% of children aged 8-11yrs and 2% of children aged 11-17yrs hardly ever or never felt safe in their home (Figure 45). Older children (8-17yrs) who felt that they saw their siblings just the right amount of time were more likely to always feel safe (90%) than those who felt that they saw too little of their siblings (69%).

To find out more about why children felt unsafe where they lived, a new question was introduced for the second phase of the pilot of the Bright Spots programme in Scotland. All the children (4-17 yrs) were asked the question 'do you want to say more about feeling safe in the home you live in now?' and invited to share their thoughts.

Across the three local authorities taking part in the second phase of the pilot, 91 children chose to provide additional information about feeling safe where they lived.

Some children explained why they felt safe in their home, giving examples of feeling taken care of at home including having someone to talk to and feeling listened to, having a safe and nice home, and having access to food and snacks. Similarly, children named individuals who made them feel safe at

home, including their parents, siblings, grandparents, carers, teachers and social workers. These experiences were shared by children across all the age groups.

For children aged 4-11 years old, having a pet at home helped them to feel safe, as well as the home comforts of toys and their bedrooms. For older children (11-17 yrs), they said they felt safe at home because there was no danger or violence and that the environment they are living in was calmer. For one child, they liked that the rules where they lived were the same as the rules they had had in other places they'd previously lived:

> *"Grandma keeps me safe by looking after me by helping me and listening to me when I am telling her something. She always makes sure that I have breakfast and snack for school." (8-11yrs)*

> *"Where I live right now is amazing and makes me feel really safe and the foster cares [sic] and the social are so nice and helpful and so are the teachers at school." (11-17yrs)*

Reasons children gave for not feeling safe at home included the behaviour of others. Across all three of the age groups, children explained that the behaviours of their siblings at home made them feel unsafe, such as fighting and physically hurting them.

Some said a lack of space also made them feel unsafe. Indeed, aspects of the home environment contributed to some children across all three of the age groups feeling unsafe. For younger children (4-7yrs) having to share a bedroom with an adult family member or not having a space of their own were highlighted. For 8–11-year-olds, three children mentioned being afraid of people who came to the front door, or the front door being left unlocked. For older children (11-17yrs), feeling unsafe within the neighbourhood they were living in, or unwelcome in the home, were given as examples of why they felt unsafe.

Younger children (4-7yrs) also explained that they felt unsafe when they were away from people who made them feel safe, for example, their mum or carer. They also gave examples of ghosts and vampires making them feel unsafe.

Older children (11-17yrs) talked about the impact of their life experiences on their feelings of safety at home, including having anxiety and feeling forgotten about. Those who had less stable home lives talked about the fear that came with this instability, and their worries about having to move or live in unsuitable temporary accommodation.

"I felt scared last time mum came to my house. I didn't see her cos I was in daddy's room but I heard her and it was at night." (4-7yrs)

"No, because I think there are some ghosts and some vampires." (4-7yrs)

"Auntie's door is always unlocked and this worries me." (8-11yrs)

"I don't feel safe alone in the house with my brother. He hurts me. My brothers annoy me." (11-17yrs)

"The house is perfectly fine, the only reason I don't feel safe is my brain." (11-17yrs)

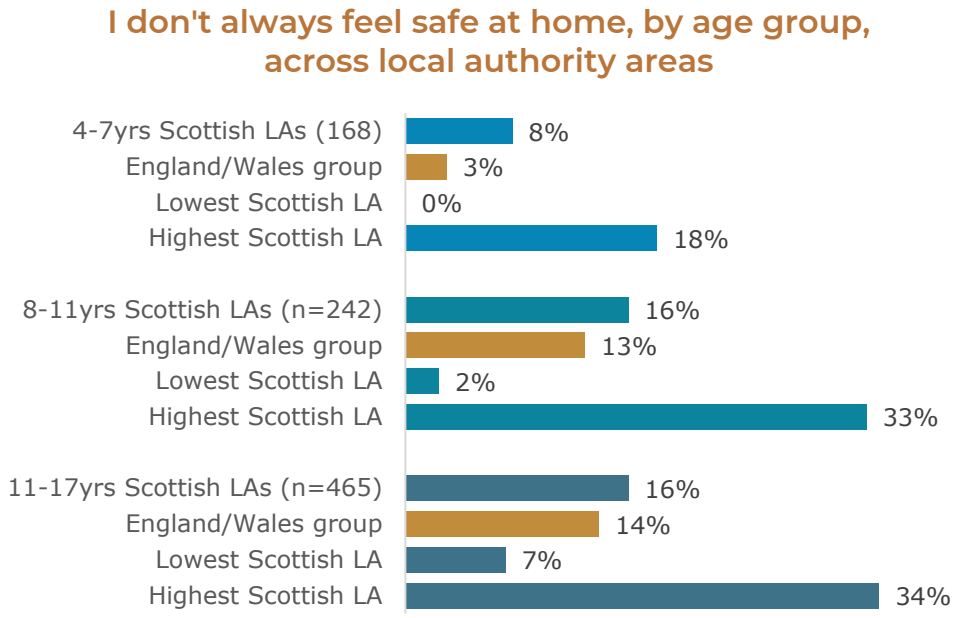


Figure 46. Not always feeling safe at home, by age group, cross local authority areas

Although the numbers were small, the percentage of the youngest children (4-7yrs) in Scotland who did not feel safe at home (8%) was significantly above that for the youngest children in England and Wales (3%). Differences for other age groups were not statistically significant.

Variation across the Scottish local authority areas was evident for all age groups, with as many as a third of children aged 8-11yrs in one local authority area (33%) not always feeling safe, and a similar percentage of children aged 11-17yrs in one area also not always feel safe (34%). The lowest percentages for each of these age groups were 2% and 7% respectively.

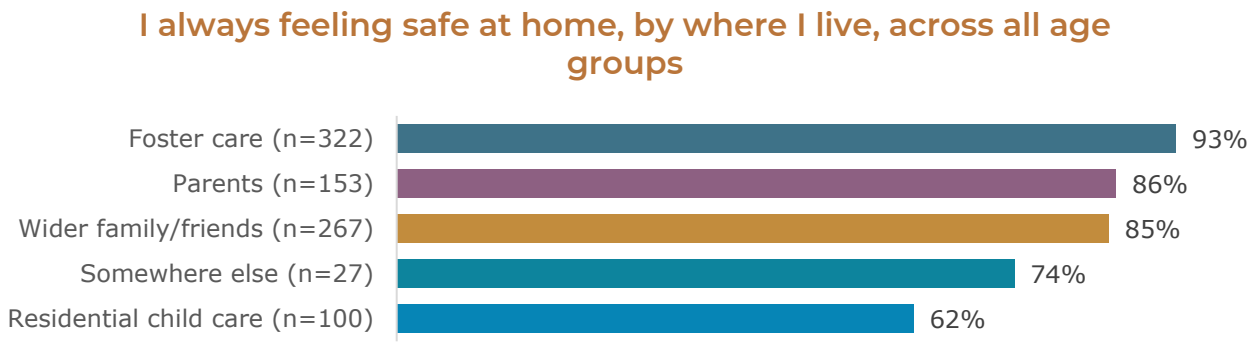


Figure 47. Always feeling safe at home by type of care, across all age groups (4-17yrs)

Looking at the environment where children who always felt safe were living and being cared for, a significantly higher proportion of children living with foster carers shared that they always felt safe when compared to children living with wider family or friends, with their parents, or living in residential child care.

Feeling settled

The Bright Spots survey also asked whether children felt settled at home.

National data for Scotland shows that just over 3,000 children came into the care system in 2022/23 and that over 2,000 of the 12,206 (17%) of children in care in July 2023 had experienced a move to a different care environment in the previous 12 months (Scottish Government, 2024a). Two thirds of the children responding to the Bright Spots surveys in Scotland had experienced at least one move to be cared for by different carers. Given that children and young people in care often experience multiple moves throughout their childhood and that providing greater stability for children and young people in care is part of a wider policy agenda within Scotland (The Promise Scotland, 2025), this is an essential aspect of wellbeing that needs to be better understood from the viewpoint of children and young people.

Bright Spots asked all children if they felt settled where they lived. The youngest children (4-7yrs) could choose 'Yes' or 'No', while children aged 8-11yrs and those aged 11- 17yrs had the options of 'Always', 'Sometimes', 'Hardly ever' and 'Never'.

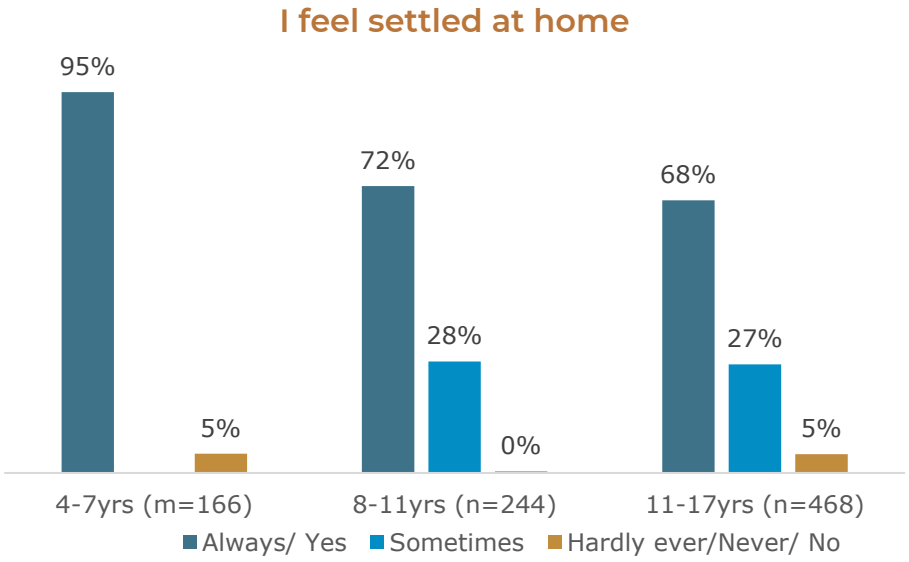


Figure 48. Feeling settled at home

Three in four (74%) of all children across age groups shared that at the time of completing the survey they did not (younger children) or did not always (older children) feel settled in their home. However, the percentage of children who did not always feel settled appeared to increase with age (Figure 48). One in twenty (5%) of the youngest children (4-7yrs) did not feel settled in their home, and over a quarter (28%) of 8–11-year-olds sometimes did not feel settled, though none hardly ever or never felt settled. For the oldest children (11-17yrs), almost a third (32%) did not always feel settled, which includes 5% who hardly ever or never felt settled.

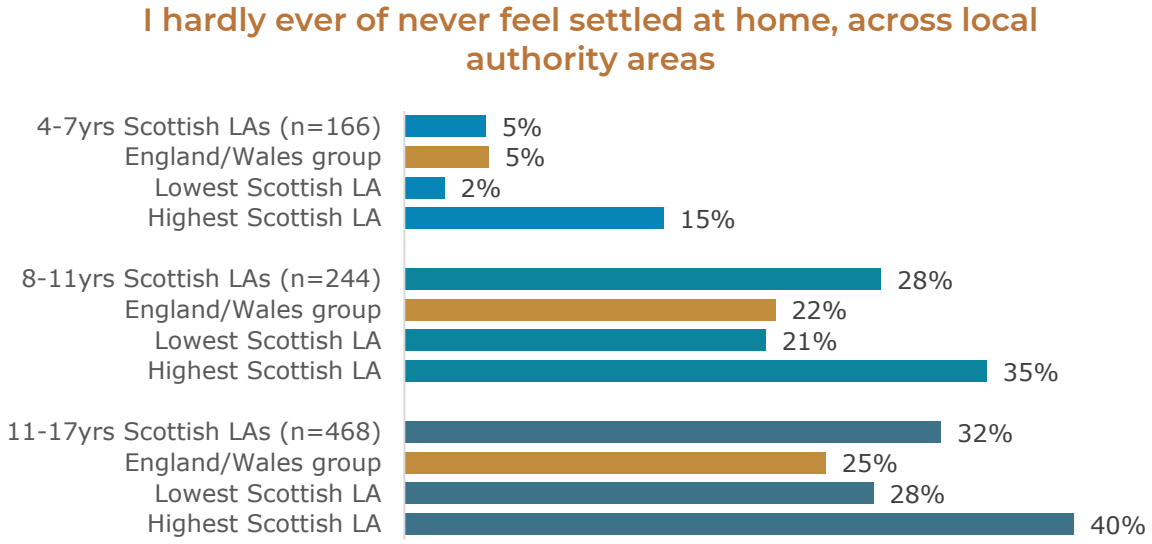


Figure 49. Hardly ever or never or feeling settled at home, across local authority areas

The percentage of the youngest children (4-7yrs) in Scotland who did not always feel settled was the same as the Bright Spots comparator group in England and Wales, but the proportion of both groups of older children not always feeling settled was significantly above the comparator group.

Substantial variation was evident across Scottish local authority areas, with up to one in seven of the youngest children (4-7yrs) not feeling settled, up to one in three 8-11-year-olds, and two in five 11-17-year-olds not always feeling settled.

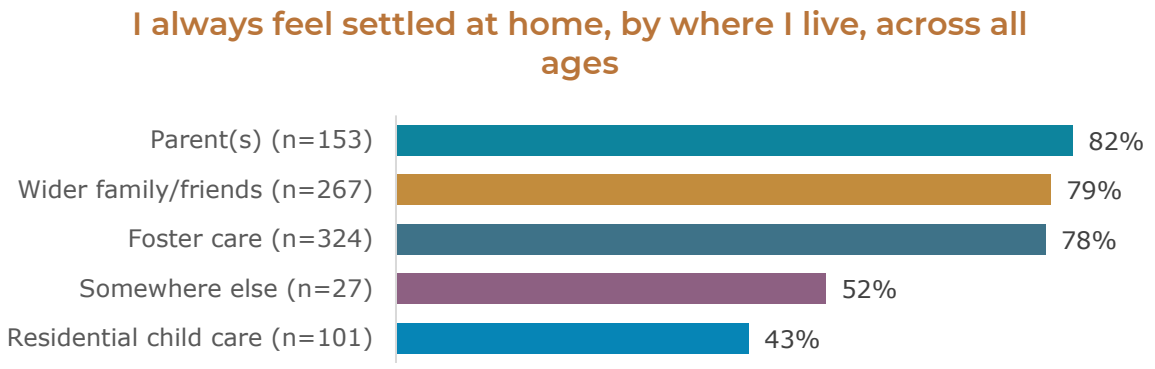


Figure 50. Always feeling settled at home, by type of care, across all ages

Where children were living and being cared for was associated with how settled they felt, and a significantly lower proportion of children living in residential child care or living in a place they said was somewhere other than with their parents, or with foster or kinship carers, always felt settled where they lived, compared to the children who lived with their parents, wider family or friends, or with foster carers (Figure 50).

Not unexpectedly, there was a very strong association between feeling settled and feeling safe at home, with 97% of the older children (11-17yrs) who always felt settled, always feeling safe at home too:

> *"I am settled with my foster dad and I want to stay with him as long as I can." (11-17yrs)*
>
> *"I chose not to see Mum, I don't have bad dreams anymore and I'm more settled here. I see my sister, brother, Dad, uncle, auntie and grandad too." (11-17yrs)*
>
> *"The area where I live sucks. I don't like it." (11-17yrs)*

Liking my bedroom

Research has shown that having the flexibility to decorate a room so that it is child-friendly is important to families (Simcock et al., 2022). Having a space that is private and where children can keep their belongings is particularly important for children who are in care and living alongside other children, young people and adults who they are getting to know.

Bright Spots asked all the children if they liked their bedroom in the home they now lived in. The youngest children (4-7yrs) could answer 'Yes' or 'No', and older children (8-17yrs) could choose to answer 'Mostly yes' or 'Mostly no'.

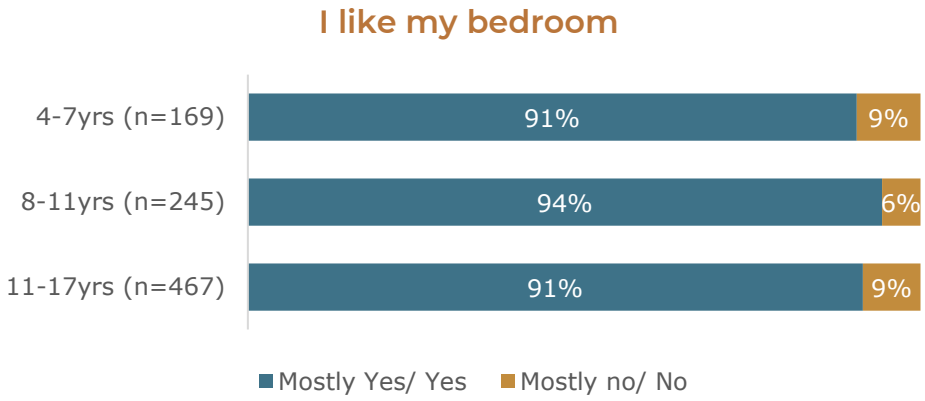


Figure 51. Liking their bedroom

Over nine in ten children across all age groups answered that 'mostly yes' or 'yes', they did like their bedroom in their current home (Figure 51). Children were not asked directly about what it was that they did and didn't like about their bedroom, however, a small number of children left comments about their bedrooms in their responses to other questions. They said they liked their bedroom because it made them feel safe, warm and comfortable:

"I like my racing car bed. It's not a small room, it's a big bed." (4-7yrs)

"I like sleeping in mama's bed with an electric blanket." (4-7yrs)

"When I stayed with Grandma it was great because I got my own bed and I was away from my brother. He moves about so much in his bed like a star fish." (8-11yrs)

The children who said they didn't like their bedroom said they wanted to have more personal space and not to have to share a bedroom with their siblings or other family members:

> *"I don't have a bedroom: I sleep in Auntie [name]'s room, and she sleeps on the couch." (4-7yrs)*
>
> *"I'd like to live in a bigger house so that I don't have to share a bedroom with my sister." (4-7yrs)*
>
> *"I would like if we got new beds as falling apart. Mum [does] not [have] enough money to buy new ones." (4-7yrs)*
>
> *"College and friends and home are good but room is terrible. No carpet on floor, bed is not good." (11-17yrs)*



Figure 52. Liking their bedroom, by type of care, across all ages

A significantly higher proportion of children who were being cared for by foster carers shared that they liked their bedroom compared to children living with their wider family or friends, their parents, in residential child care or somewhere other than with their parents, or foster or kinship carers or residential child care.

Having fun and taking part in activities outside school

In Scotland, corporate parents have a duty to make sure that 'looked after' children have the "opportunities to participate in activities designed to promote wellbeing" (Children and Young People (Scotland) Act 2014, s. 58(d)). This includes making sure that children and young people have opportunities to be active and participate within their community, the same as every other child or young person. Article 31 of UNCRC (1989) states that children have the right to engage in play and recreational activities appropriate to the age of the child. Having opportunities to play with friends, follow our interests and grow our

skills and talents is an important aspect of learning about who we are as human beings and developing our individual identity and personality.

Bright Spots asked the younger children (4-7yrs) 'at the weekends, do you get to have fun?' and they could choose 'Yes' or 'No'. The 8-11-year-olds were asked how often they got to have fun at the weekends, and could choose to answer 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'. Older children (11-17yrs) were asked a different question about time they spent enjoying hobbies.

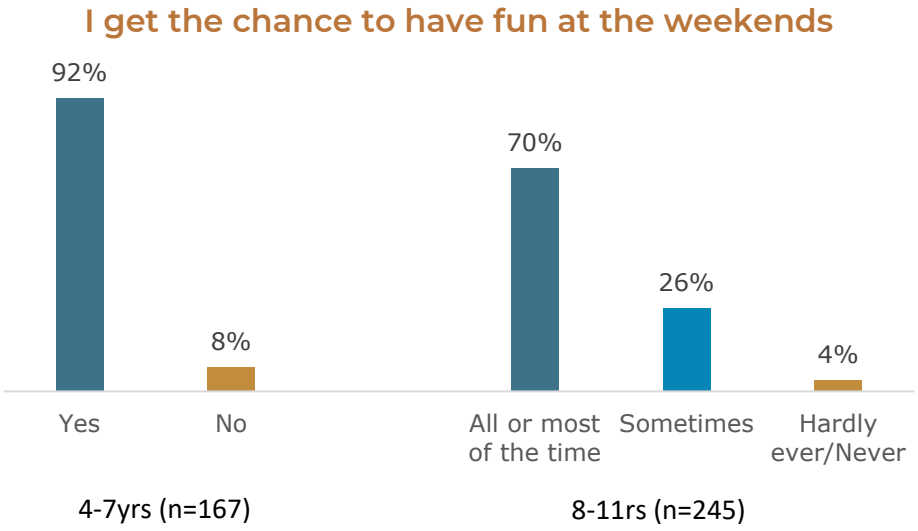


Figure 53. Getting the chance to have fun at weekends

For both age of these groups, a large majority of children shared that they did get to have fun at the weekends, with 92% of 4-7 years responding 'yes' and 96% of 8-11 years responding that they got to have fun at the weekends 'all or most of the time', or 'sometimes'.

Whilst the children were not asked directly about what they did for fun, a small number of the children provided insights into what they did for fun in their responses to other questions. The types of activities described by children included: playing with toys; playing with family members or friends; taking part in activities, including attending after-school clubs and groups for care experienced children, going on bike rides, playing hide and seek or watching movies; and day trips, for example, going to the trampoline park or the zoo.

> *"I like playing with my toys like dinosaurs, cars. I like it when [name] comes to play and we played hide and seek." (4-7yrs)*

"I liked watching movies with popcorn and playing on my Switch until the battery went down." (8-11yrs)

They also took the opportunity to describe what they would like to do more of for fun. This included: playing more on computers, games consoles and video games; taking part in outdoor activities like going for walks or playing outside; going on more day trips, for example, going swimming or to the fair or to the beach; having more toys to play with like more cars or more toys for the garden; and having more opportunities to play with their mum and dad.

"I would love to go to the beach more, I feel happy there. I liked going swimming with my class in p4." (8-11yrs)

"If Dad could take me places instead of being in the one place." (8-11yrs)



Figure 54. Getting the chance to have fun at weekends all or most of the time, by type of care, 8-11yrs

Looking at the responses from 8-11-year-olds who said they got to have fun on the weekends all or most of the time, four in five of the children living with foster carers (80%) shared that they got to have fun on the weekends all or most of the time, compared to 66% of children living with wider family or friends and 61% of children living with their parents.

"It's fun spending time with the family going to zoos." (8-11yrs, foster care)

"Like having fun with them and play some imagination friends games with them." (8-11yrs, foster care)



Figure 55. Getting the chance to have fun at the weekend, across local authority areas, 8-11yrs

One local authority area stood out as having a much lower percentage of children aged 8-11yrs who felt they had fun at the weekend all or most of the time, with fewer than half feeling they got this opportunity. 78% was the highest percentage of the six areas (Figure 55).

Bright Spots asked the older children (11-17yrs) about their hobbies and how often they got the opportunity to spend time enjoying their hobbies or activities outside school, college or university. They could answer 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'.

Most children (61%) shared that they took part in their hobbies all or most of the time, 30% said that they sometimes did, and 9% said that they hardly ever did or never took part in hobbies outside of school (Figure 56).

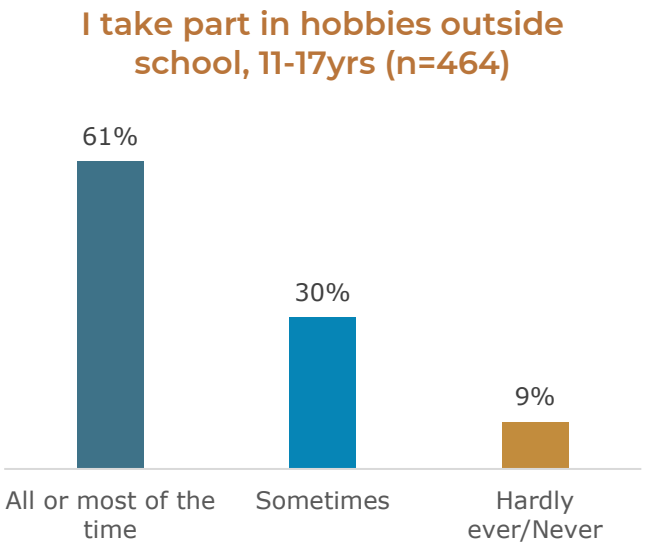


Figure 56. Taking part in hobbies outside school, 11-17yrs

This highlights that whilst most of the children were experiencing activities which should contribute to their wellbeing, there are some who felt they were not getting this chance.

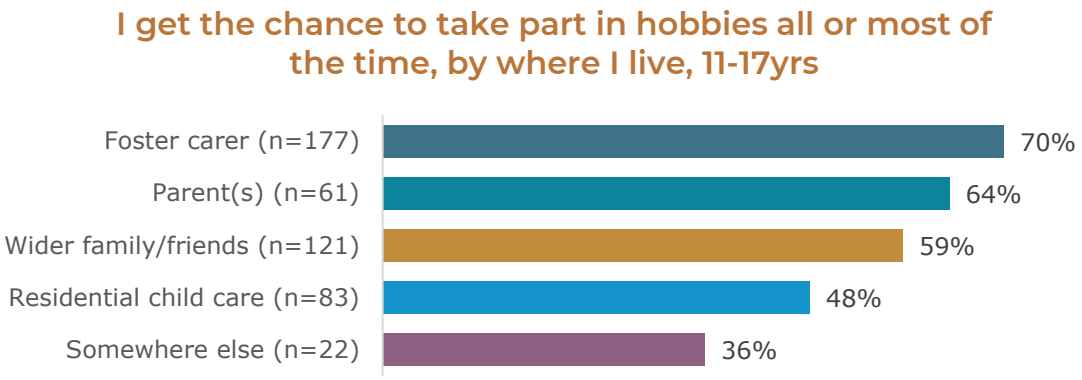


Figure 57. Taking part in hobbies all or most of the time, by type of care, 11-17yrs

Figure 57 shows differences in experience depending on where a child was living and being cared for. 70% of the children living in foster care felt they had the chance to take part in activities all or most of the time. This was significantly above the percentage for children living in residential child care, where less than half felt they had this opportunity (48%), and the percentage of the small number of children living in a place they said was somewhere other than with their parents, or foster or kinship carers (36%).

> *"Help with being able to do more fun activities and trips." (11-17yrs, with parent(s))*

> *"It's not a nice experience being pulled away from family, friends, hobbies etc." (11-17yrs, foster care)*

> *"The pocket money system is unfair. I need to use it for everything, including doing activities with friends." (11-17yrs, residential child care)*

Some older children (11-17yrs) provided comments in response to other questions that described what got in the way of them being able to have fun. Reasons included rules about having friends visit where their lived; having to "earn" social time with their friends; not having enough pocket money; a lack of freedom, independence and feelings of being trusted; a lack of help to access fun activities and trips, as well as limited communication about opportunities that were available; and a wish for better Wi-Fi to stay connected to their friends and family.

> *"Better communication, location and better activities. (11-17yrs, with parent(s))*

"Spending time with friends and having social media whenever I want, not to having to earn it." (11-17yrs, residential child care)

"More pocket money so I can be independent." (11-17yrs, foster care)

Being outdoors in nature

Being outdoors in nature is good for everyone's health and wellbeing (Care Inspectorate and Inspiring Scotland, 2018). Spending time in nature gives children and young people more opportunities to be active, play and interact with other children and young people (Johnstone et al., 2021). The Scottish Government also recognises the importance of children having access to the outdoors, and the right to play outdoors has been included within the national Health and Social Care Standards (Scottish Government, 2017). This means that services to working to meet the needs of children and young people need to think about how they help children and young people to spend time outside in nature.

Bright Spots asked children aged 8 and over how often in the past week they had spent time outdoors in nature. They could answer 'Every day', More than once a week', 'Once this week' or 'Not at all'.

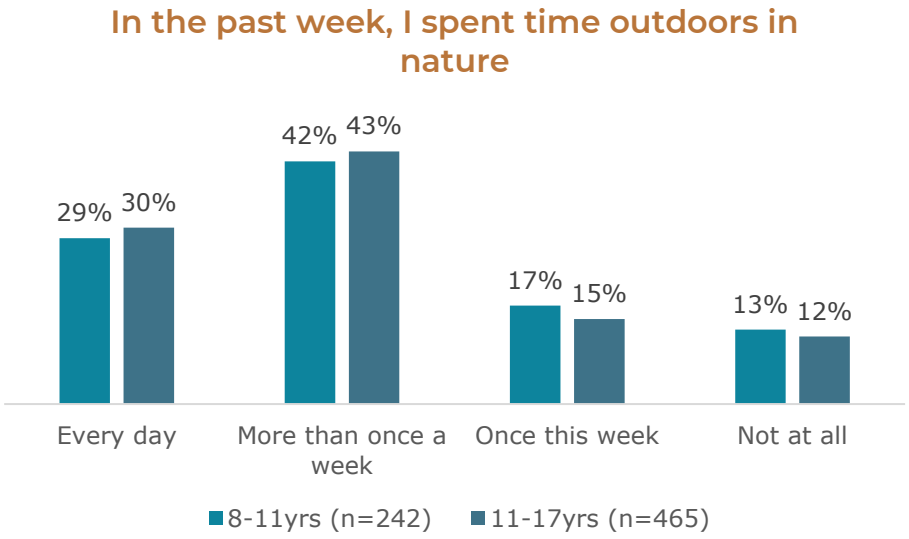


Figure 58. Spending time outdoors in nature in the past week

Percentages were similar for both age groups of children, with 88% of both groups combined spending time outdoors in nature at least once a week, 30%

getting out every day, and 12% not spending any time outdoors in nature in the previous week. (Figure 58).

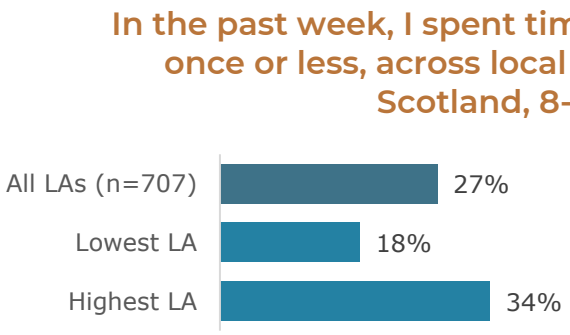


Figure 59. Spending time outdoors in nature no more than once in past week

In one local authority area, one in three children (34%) spent time outdoors in nature no more than once a week, and this figure dropped to 18% in two local authority areas which covered more rural areas, though it is not possible to determine if children were living in an urban or rural setting within these local authority areas. One child commented that they didn't previously get the opportunity to spend time outdoors in nature, and another wanted more opportunity to be outdoors.

"I never used to get out in nature." (8-11yrs, foster care)

"[I'd like] more fun outside." (8-11yrs, with parent(s))

Opportunities to be trusted

Children and young people involved in development of the Bright Spots survey felt that having opportunities to show that they can be trusted with responsibilities was important to them and contributes to their overall wellbeing (Wood & Selwyn, 2017). School is a big part of children's lives and offers opportunities to learn and practice new life skills, like being trusted and taking on roles and age-appropriate responsibilities.

The Bright Spots surveys asked children about the opportunities they had to be trusted by adults. The 8–11-year-olds were asked 'How often do you get the chance to help the teacher?', and the 11–17-year-old age group were asked 'How often do you get the chance to show you can be trusted?'. Both age groups could answer 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'.

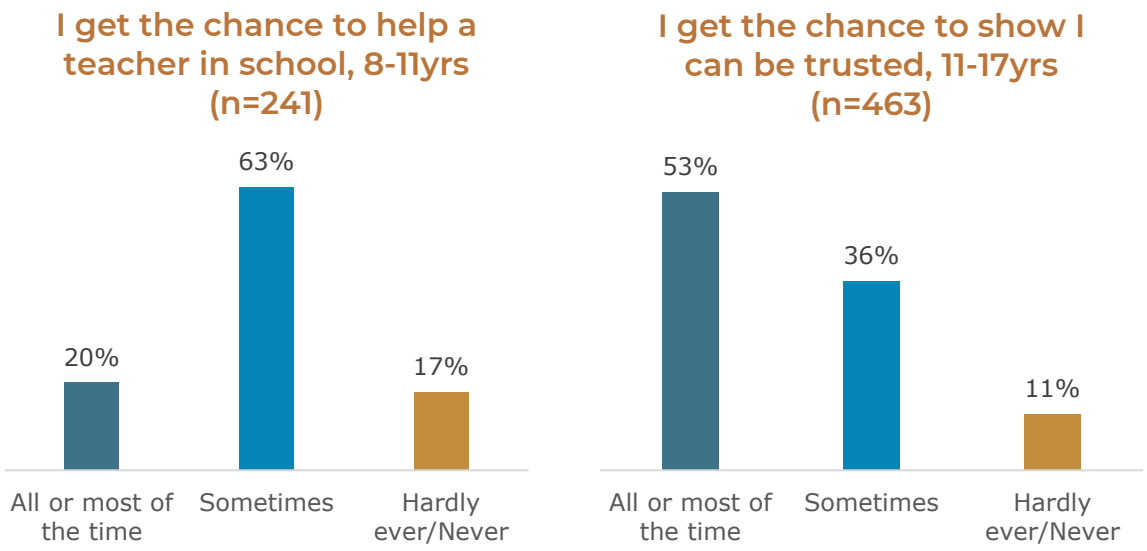


Figure 60. Getting the chance to help a teacher in school (8-11yrs), and getting the chance to show the child can be trusted (11-17yrs)

The majority of 8-11-year-olds felt they had the chance to help a teacher sometimes (63%), with 20% indicating that they got the chance all or most of the time, and 17% feeling that they hardly ever or never got this chance (Figure 60).

For the older children (11-17yrs), just over half (53%) felt that they had the chance to show they could be trusted all or most of the time, with 36% sharing that this was only sometimes, and 11% indicating that they hardly ever or never got to show they could be trusted by adults. While most of the children said they got a chance to show they could be trusted at least sometimes, one in ten felt that they rarely or never got this opportunity:

> *"I feel like I can be trusted more. My carer can trust me to go to the shop and going to the park, walking to school and going for a run." (11-17yrs)*
>
> *"[What would make being in care better?] Being trusted more. More pocket money." (11-17yrs)*

Practising life skills

International research, alongside the recent 'Moving On' from Care into Adulthood Consultation analysis in Scotland has emphasised the importance of all children and young people learning life skills which will help them to be successful in life (Cruz et al., 2025; Scottish Government, 2025b). Selwyn,

Wood and Newman (2017) also found that learning life skills was important to children and young people in care, showing others and themselves that they could manage responsibility, and also have the opportunity to make mistakes and try again. This is why the Bright Spots survey asks questions about the opportunities that children have to be responsible, including learning the life skills they will need as they grow older and become more independent.

Bright Spots asked the older children (11-17yrs) if they got the opportunity to practice life skills such as cooking healthy food, washing clothes or using money. They could answer, 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'.

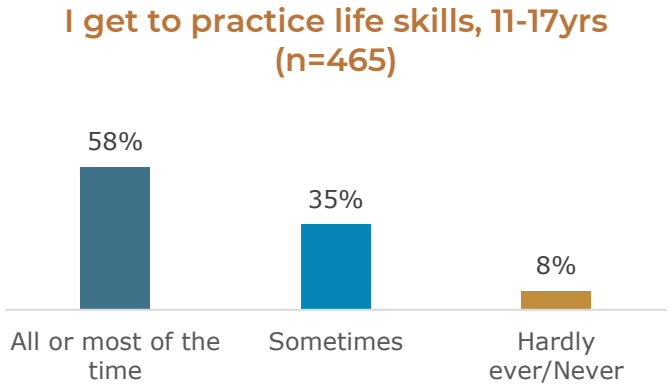


Figure 61. Getting to practice life skills, 11-17yrs

The majority of older children (11-17yrs) shared that they had opportunities to practice life skills all or most of the time (58%), but 8% felt that they hardly ever or never got this opportunity (Figure 61). It is encouraging that most of the children who responded felt that they were able to engage in opportunities that should enhance their overall wellbeing but, as with other indicators, there was a small proportion who felt that they were not getting the same opportunities.

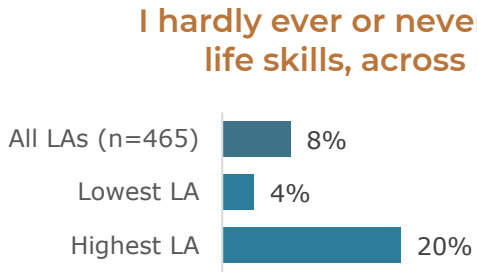


Figure 62. Hardly ever or never getting the opportunity to practice life skills, across local authority areas, 11-17yrs

The proportion of older children (11-17yrs) who felt they hardly ever or never had the opportunity to practice life skills ranged from around one in 20 children to one in five across the local authority areas in Scotland (Figure 62). Some older children suggested that they could be provided with more appropriate opportunities to practice life skills, and one child felt that safety concerns were preventing the development of life skills. Another felt that a lack of money was preventing them from being more independent.

> *"I wish there was a better system. And more life skills stuff that suits the person." (11-17yrs)*
>
> *"Less safety issues (for example using bleach or doing some meals - I would rather cook some meals for myself but not allowed to due to safety hazards). The safety issues are too much for my age." (11-17yrs)*
>
> *"More pocket money so I can be independent." (11-17yrs)*

School, college, and university

The Health and Wellbeing Census Scotland, which asks school aged children in years P5 to S6 questions about their health and wellbeing, has showed that as children get older, their attitude towards school changes and becomes less positive (Scottish Government, 2023b). The results of the census undertaken around the same time the Bright Spots Programme pilot began in Scotland showed that children who come from areas with higher levels of deprivation are likely to have lower perceptions of enjoyment of learning, being at school and feeling like they are treated fairly by their teachers than their peers living in areas with lower levels of deprivation (Scottish Government, 2023b). This is consistent with research from England which shows that enjoyment of and engagement with school decreases as children get older (Jerrim, 2025). National data has indicated that the educational outcomes of 'looked after' children have been improving over recent years (Scottish Government, 2023a); however, many children with experience of care have poorer educational outcomes and the gap between their outcomes and that their non care experienced peers remains (Scottish Government, 2025c).

It is important to recognise that the COVID-19 pandemic may have had an impact on the learning experiences of children who responded to the Bright Spots surveys during the Scotland pilot, particularly those who participated in 2022.

Bright Spots asked the youngest children (4-7yrs) if they liked school, and they could answer 'Yes' or 'No'. Children over the age of 7 were asked how much they liked school, college or university, and they could answer 'A lot', 'A bit', 'Not very much', or 'Not at all'.

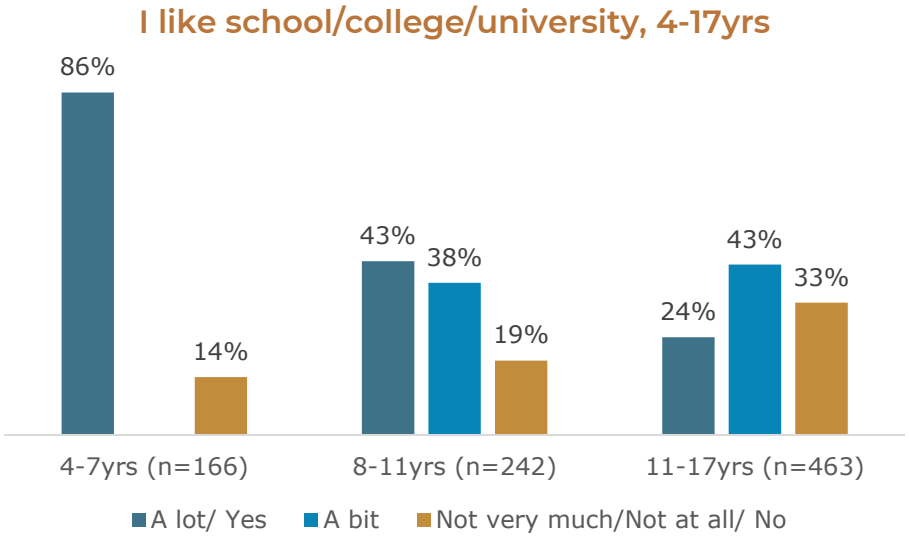


Figure 63. Liking school/college/university, 4-17yrs

Overall, children liked going to school, college or university less as they got older, a similar pattern to that seen in the responses from children in England and Wales who have completed the Bright Spots surveys (Selwyn & Briheim-Crookall, 2022). The proportion of children aged 8-11yrs who liked school a lot was half that of 4–7-year-olds who liked school (86% to 43%), and this almost halved again for older children (24%, Figure 63). One in three of the older children did not like school compared to one in five 8-11-year-olds, and one in seven of the youngest children (4-7yrs).

Whilst the Bright Spots surveys did not ask the children what they liked or disliked about school, several children talked about school when responding to other questions. Some said they have people who support them with school or at school and that this makes school better. For example, children told us that they liked school because they feel listened to at and about school; get support from carers and teachers around school; get to go to an after-school club; had breakfast and enough snacks for school; and that while they are at school, they get to see the siblings they no longer live.

> *"She [grandma] always makes sure that I have breakfast and snack for school." (8-11yrs)*

> *"When I was at dad's I used to be on my phone all day and I used to have long lies and be late for school. Now I wake up early so I can go to school." (8-11yrs)*

> *"I feel like adults listen to what I have to say and what's important to me. Like at school, college. For example, I said to the college man I may need some support because of my disability and he said oh don't worry if u get stuck with anything I will come and help you." (11-17yrs)*

Children also told us what they did not like about school. Younger children (4-11yrs) were more likely to comment then that they would like to either not have to go to school or go to school less often:

> *"Not go to school every day." (4-7yrs)*

Some of the older children (11-17yrs) said that they didn't like school because it prevented them from seeing their friends, they don't feel listened to, and they feel judged by their peers:

> *"All they care about is school, they don't listen to why, if I get into trouble, I get grounded so the only time I can see my friends, is during the day so I will skive school." (11-17yrs)*

> *"If I tell anyone that I am in care I feel that other children will judge me. Perhaps more work could be done in school to educate as I do get asked questions a lot such as do you not see your parents etc." (11-17yrs)*

> *"Not listened to about my mental health, school said I was a problem child, said it was just behaviour." (11-17yrs)*

There were mixed views about when practitioners who aren't their teachers come in to meet with children at their school. Three of the younger children (4-11yrs) felt that having professionals visit them at school was important, with one also saying that they would like their social worker to walk them home from school so that they could meet their family:

> *"[…] if they wanted to come and see me in school then we could walk to my house together and I can show you my house and you can meet my little sister and family." (4-7yrs)*

However, some older children (11-17yrs) shared that they were uncomfortable because other children in their school were aware that they were in care, and that interacting with social workers and other practitioners at school could be contributing to stigmatisation because it made them stand out from or feel different to their peers:

"I don't really like it. People have figured it out at school and say stuff to me about in care." (11-17yrs)

"In school they make me feel different and get into trouble more." (11-17yrs)

"When I go to school, they beep the horn to embarrass me in front of people at my school." (11-17yrs)

Older children(11-17yrs) living with foster carers (77%) were significantly more likely to enjoy school, college or university than those living with their parents (62%), wider family or friends (61%) or in residential childcare (56%) (Figure 64).

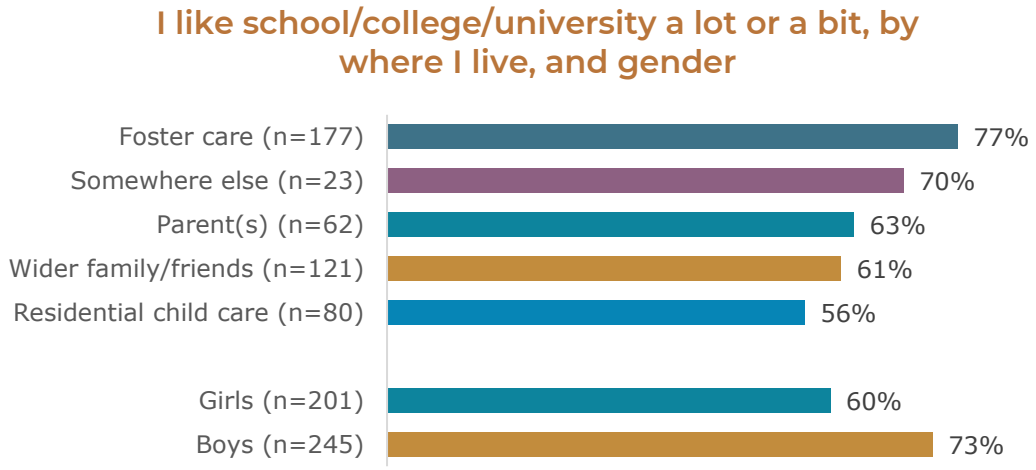


Figure 64. Liking school/college/university a lot or a bit, by type of care, and gender (11-17yrs)

70% of the comparatively small number of children living somewhere else such as supported accommodation liked school, college or university a lot or a bit.

Boys in this age group were said they enjoyed school/college/university more than the girls did (73% to 60%).

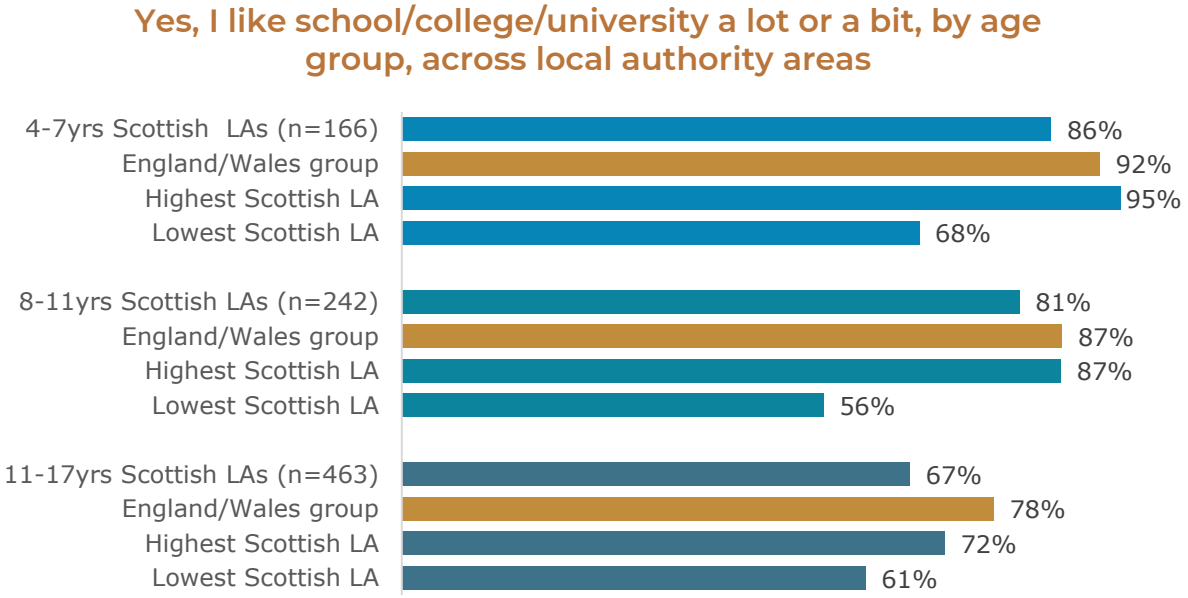


Figure 65. Liking school/college/university a lot or a bit, by age group, across local authority areas

The Scottish pilot local authority areas with the lowest percentages of children aged 4-7yrs and 8-11yrs liking school were noticeable outliers and should be treated with some caution because of comparatively small numbers, but it is clear that experiences vary around the country (Figure 65).

Across all three age groups, a lower proportion of children in Scotland shared that they liked school, college or university, than those in the Bright Spots comparator group, and this difference increased with age. When the results for children of all ages were combined, the difference between Scotland and England and Wales was statistically significant. It is important to note here that children in England and Wales took part in Bright Spot before the COVID-19 pandemic and the associated public health restrictions put in place, and it is recognised that this had a major impact on children's experience of school (Anders et al., 2023; Knudsen et al., 2025).

Fear of going to school because of bullying

'Respect for all: The National Approach to Anti-bullying for Scotland's Children and Young People' (Scottish Government, 2024b), acknowledges both the short-term and long-term effects of bullying on children and young people's mental, emotional, social and physical wellbeing.

Bright Spots asked children aged 8-17yrs 'Do you ever feel afraid of going to school, college or university because of bullying? (For example, being hit or called mean names, or nasty stories being spread about you)'. The children could answer 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'.

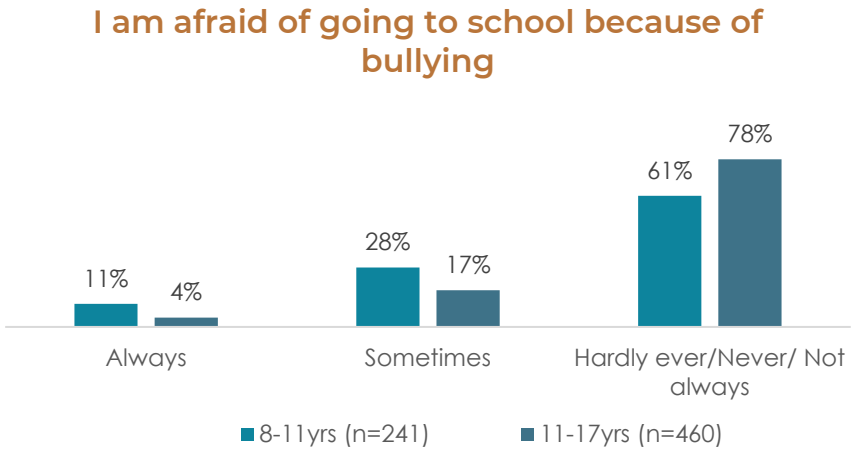


Figure 66. Fear of going to school because of bullying

Whilst the majority of children aged 8-17 years old across the six Scottish local authorities said they were hardly ever or never afraid of going to school, college or university because of bullying (61% of 8-11-year-olds and 78% of 11-17-year-olds), almost two in five of the children aged 8-11yrs (39%) and one in five of the older children aged 11-17yrs (21%) were afraid of bullying at least sometimes, with one in ten of the children aged 8-11yrs always feeling afraid of going to school because of bullying (Figure 66).

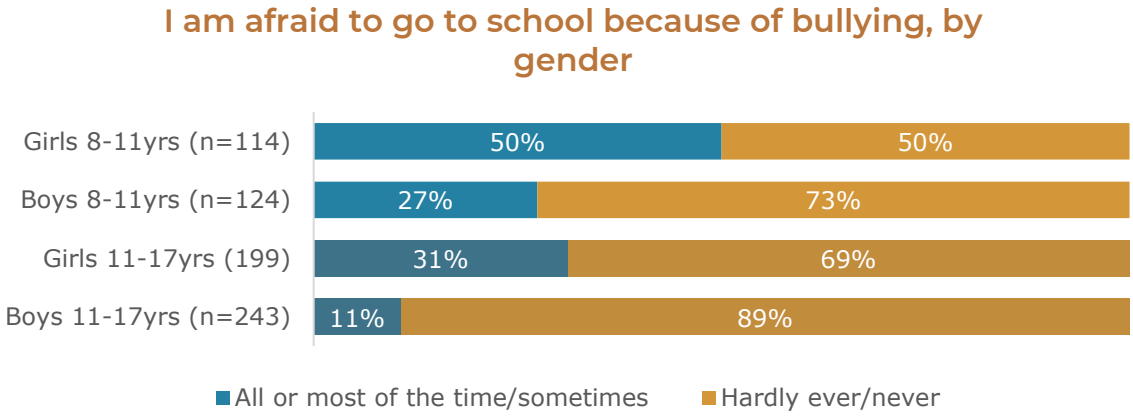


Figure 67. Fear of going to school because of bullying, by gender

In both of these age groups, girls were significantly more likely to be afraid of bullying at least sometimes than boys were. Figure 67 shows that half of the girls aged 8-11yrs were afraid of bullying at least sometimes compared to just over a quarter of the boys (27%), and almost a third of the girls aged 11-17yrs were afraid at least sometimes compared to just one in ten of the boys who were (11%).

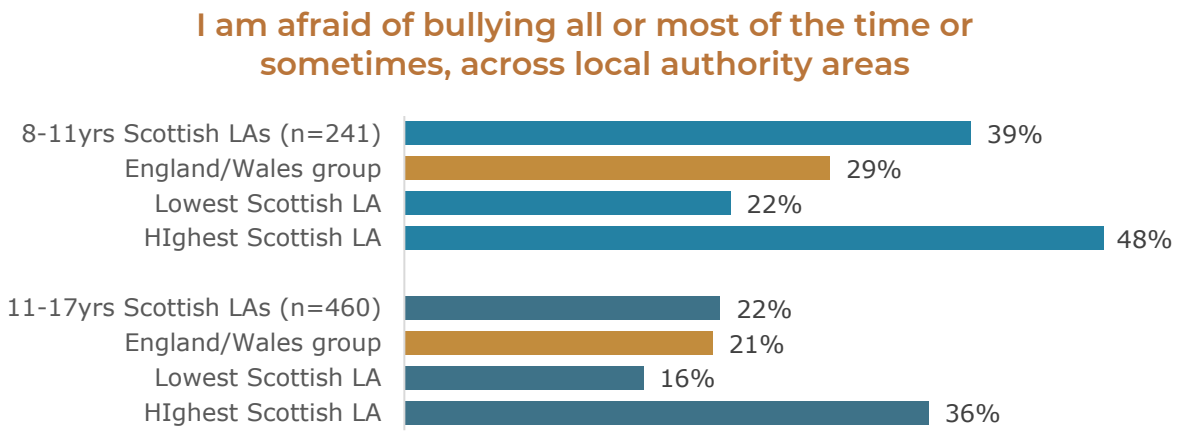


Figure 68. Fear of going to school because of bullying all or most of the time or sometimes, across local authority areas

Substantial variation was apparent across the participating local authority areas in Scotland, with the percentage of 8-11-year-olds who were afraid of bullying at least sometimes ranging from 22% to 48% (Figure 68). Among the older children (11-17yrs) this ranged from 16% to 36%, though the area with the highest percentage (36%) stands out compared to other areas.

A significantly higher proportion of children in Scotland aged 8-11yrs were afraid of going to school because of their fears about being bullied at least sometimes than in the Bright Spots comparator group in England and Wales (39% vs 29%). It is important to note that the survey data for England and Wales is from 2015-2020 and the data for this Scottish pilot is from 2022 and 2024.

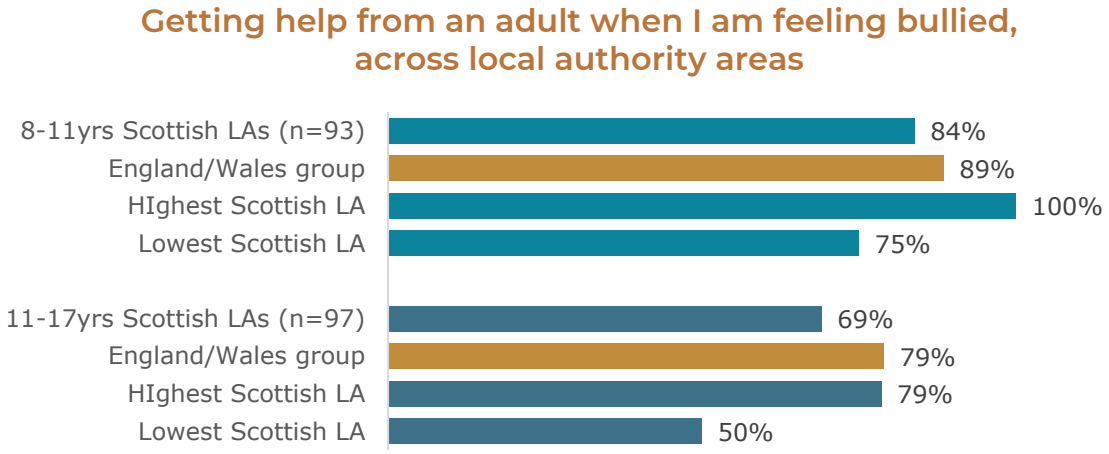


Figure 69. Getting help from an adult when feeling bullied

Most of the children who were afraid of going to school, college or university due to a fear of being bullied, shared that they were receiving help from an adult, but a much lower percentage of older children (11-17yrs) indicated that they were receiving help from an adult than the percentage of children aged 8-11yrs who were receiving help (69% compared to 84%, Figure 69).

Whilst Bright Spots did not ask children about who they got help from, in response to other questions in the survey, one child explained that they got help from their mum and grandad, whereas another child got help from their friends:

> *"The only people who listen to me are my mum and grandad. When I got bullied on the bus I was put into care. I have been bullied at school and have PTSD from being bullied over and over since primary 4." (11-17yrs)*

> *"[…] My friends help me when I am almost bullied." (8-11yrs)*

Substantial variation was again apparent across the Scottish local authority areas here for both age groups, and again the percentages should be treated with caution because of the small numbers involved. The proportion of children aged 8-11yrs who felt they were receiving help when they felt bullied ranged from three quarters to all children, and for older children the proportions ranged from half of these children to almost four in five (79%).

Looking at the comparison between the Scottish areas and the comparator group in England and Wales, a slightly lower proportion of children aged 8-11yrs in Scotland said they were receiving help from an adult (84% compared to 89%), with a larger and statistically significant difference seen in the responses from older children (11-17yrs) (69% compared to 79%).

Bright Spots also asked children (8-17yrs) if the adults they lived with showed an interest in their education. They could answer 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'.

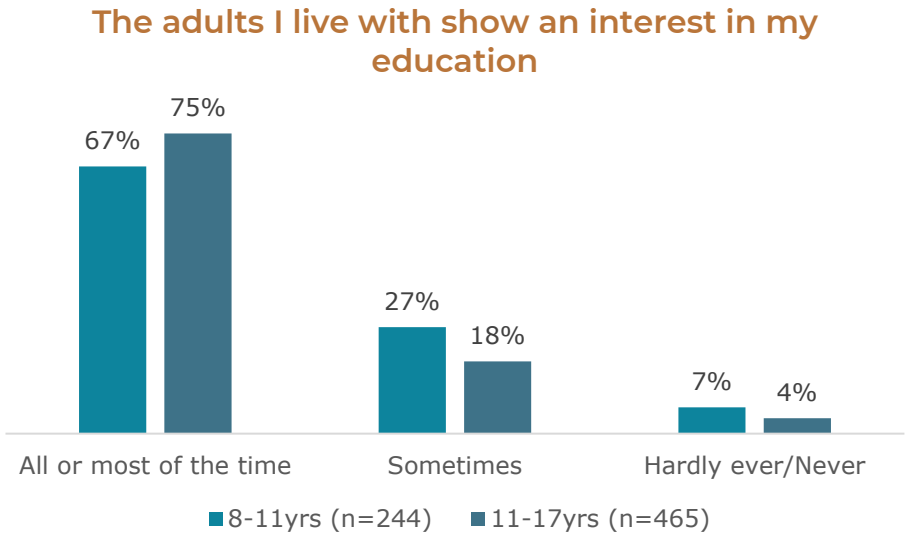


Figure 70. Adults the child lives with shows an interest in their education

Two thirds of children aged 8-11yrs and three quarters of the older children (11-17years) felt that the adults they lived with were interested in their education all or most of the time (Figure 70).

93% of children aged 8-11yrs felt that the adults they lived with were interested in their education at least some of the time, as did a slightly higher percentage of older children (11-17yrs, 96%). 7% of children aged 8-11yrs and 4% of 11-17-year-olds felt that adults they lived with were hardly ever or never interested in their education.

Summary – Daily Life

How I feel about where I live

- A large majority of children of all ages always felt safe in their home, always felt settled, and liked their bedrooms. Children living with foster carers were more likely to always feel safe and children living in residential child care were least likely to feel settled where they lived.

- The proportion of children who did not always feel safe at home varied markedly across the local authority areas, from one in 17 in one area to one in four in another area.
- Children explained that they feel safe at home when they are taken care of, and because of the positive relationships they have with the people they live with. They said that when they feel unsafe this is because of the behaviour of other people they live with and/or because of the environment they are living in.
- Children aged 8 and older in care in Scotland were significantly less likely to always feel settled in their home than those in care in England and Wales.

The opportunities I have

- A large majority of the children responding to the surveys felt they got the opportunity to have fun at weekends or to spend time with their hobbies, and to be outdoors in nature regularly.
- Almost one in 10 of the older children (11-17yrs) felt that they rarely or never got the opportunity to take part in hobbies outside school. Children living with foster carers were significantly more likely to take part in hobbies all or most of the time than those living in residential child care home or a place they said was somewhere other than with their parents, or foster or kinship carers.
- The availability of opportunities varied across local authority areas, with less than half of children aged 8-11yrs in one area feeling they had the opportunity to have fun at weekends all or most of the time, compared to three quarters or more in the other areas. Almost twice as many children aged 11-17yrs were not getting the opportunity to be outdoors

in nature more than once a week in the area with the highest percentage, compared to the area where fewest children did not get outdoors frequently (34% to 18%). Children living in more rural areas may have more opportunity to be outdoors in nature.

- Nine in 10 children aged 11-17-years-old felt they had opportunities to show they could be trusted and to practice life skills at least sometimes, but variation across local authority areas was again substantial. Just one in 20 of these older children in one area felt they never or hardly ever got the opportunity to practice life skills, compared to one in five in another area.

School, college and university

- Just like their non care experienced peers, the proportion of children liking school, college or university decreased with age, and a third of the older children (11-17yrs) told us that they didn't like school, college or university very much or at all.
- Children aged 11-17 years being cared for by foster carers were significantly more likely to like school than the children who lived with their parents, wider family or friends or in residential child care, and girls were less likely to like school than boys.
- Although some caution is required because of small numbers completing the surveys in some local authority areas, differences in the proportions liking school, college or university a little or a lot between local authority areas were striking, particularly for children aged 8-11yrs. The proportion of children of all ages taking the surveys in Scotland who did not like school, college or university was significantly higher than that of their counterparts in England and Wales, although it should be noted that the survey data for England and Wales pre-dates the COVID-19 pandemic and associated public health restrictions which had an impact on experience of education.
- Whilst most children who responded to the surveys said they were not afraid of going to school, college or university because of fears of bullying, nearly two in five of the 8-11-year-olds and one in five of the 11-17-year-olds were afraid at least some of the time. One in 10 of 8-11-year-olds always felt afraid to go to school because

of bullying, and girls were more likely to be afraid than boys in both age groups.

- The different level of fears about bullying were particularly apparent across local authority areas, with the percentage more than doubling from the area with the fewest children afraid at least sometimes, to the area with the most, across both age groups.
- Nearly four in 10 children aged 8-11 years in Scotland were afraid of going to school, college or university because of bullying at least sometimes, compared to nearly three in 10 children in the Bright Spots comparator group in England and Wales.
- Most of the children who said that were afraid of going to school, college or university due to potential bullying felt that they were getting help from an adult, but fewer older children (11-17yrs) felt that they had this support than the young children, with one in three feeling that they were not getting any help from an adult.
- The majority of children felt that they lived with an adult who showed an interest in their education. Two in three 8-11-year-olds and three in four 11-17-year-olds said that an adult they lived with who showed an interest in their education all or most of the time.

Wellbeing



Wellbeing

The aim of children's social care in Scotland is to give every child the opportunity to thrive, and children's care and protection services are intended to have a positive and life-changing impact for the children and families who need and experience this support. However, care experienced children and young people have consistently been found to have much higher rates of mental health difficulties than the general population (Sanders, 2020). The Independent Care Review (2020a) in Scotland heard that too many children who experience the 'care system' have had deeply distressing and traumatic experiences and, for some children, going into care and moving through the care system was part of that trauma, increasing the risk of them experiencing poor mental health. Recognition that children and young people with care experience may both need and benefit from trauma-informed practice led to development of specific guidance for the workforce supporting these children and young people in Scotland (Improvement Service, 2023). Experiencing trauma before and during being in care, and positive experiences of care, can all impact on wellbeing, and the Bright Spots surveys sought to examine the wellbeing of children and compare their wellbeing using a series of indicators against their non care experienced peers in the general population.

Having worries and feeling supported

Experience of anxiety was one of the national wellbeing indicators that ONS reported on for children at the time the Your Life, Your Care survey was developed. Other national wellbeing indicators for children used by ONS are included in the Your Life, Your Care survey to allow comparison with the general population of children, but the children involved in the development of the survey expressed reservations about inclusion of the question about experience of anxiety. As an alternative, they helped devise a two-part question about worries rather than anxiety.

Bright Spots asked children aged 8-17yrs if they worried about their feelings or behaviour, and could choose to answer 'All or most of the time', 'Sometimes', 'Hardly ever' or 'Never'. If they responded 'All or most of the time', or 'Sometimes', a follow-up question then asked if they felt they got help with those worries from an adult, to which they could answer 'Yes' or 'No'.

Just over six in 10 children (8-17yrs) worried about their feelings or behaviour at least sometimes, and one in 10 worried all or most of the time (Figure 71).

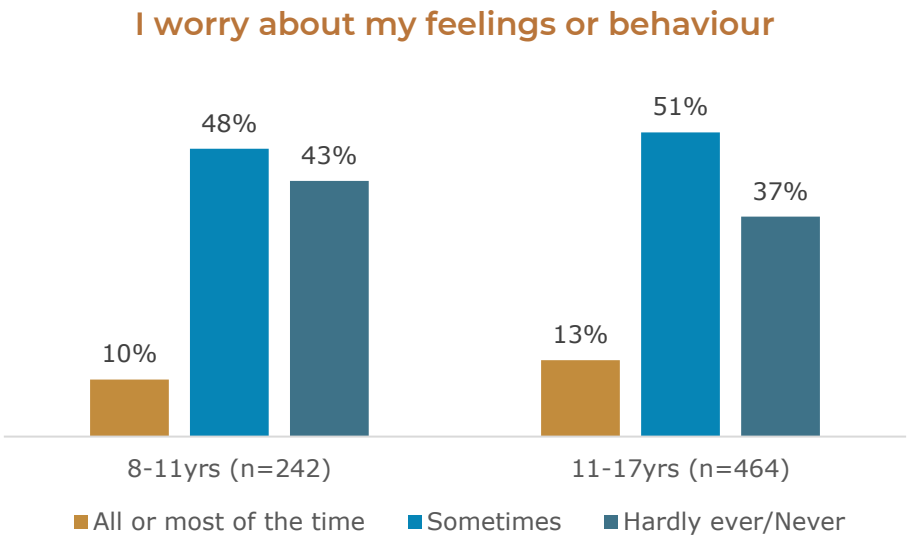


Figure 71. Worrying about feelings or behaviour

The majority (57%) of the children aged 8-11yrs worried about their feelings or behaviour 'sometimes' or 'all of most of the time', and 85% of these children indicated that they were getting help from an adult (Figure 71).

> *"Hard to talk about feelings. Hard to put feelings into words. Talk to who I trust sometimes." (8-11yrs)*

Almost two in three (63%) of the older children (11-17yrs) worried 'sometimes' or 'all of most of the time', and almost three in four (73%) of these children shared that they were getting help from an adult. In their comments, some children described their negative feelings.

> *"I tend to think about my past rather than my future at the moment and can be a bit pessimistic in my thinking." (11-17yrs)*

Some acknowledged negative feelings and behaviour that they felt able to cope with or were getting support to deal with them:

> *"It is my feelings that would cause me problems as I bottle them up. I am not concerned about my behaviours. I have help with this." (11-17yrs)*

> *"I don't really tell anyone my problems, I solve them myself. I've always done that. I feel like being in care has made me grow up quicker. It has toughened me up." (11-17yrs)*

"I feel ok. Sometimes I just feel angry and stressed sometimes." (11-17yrs)

One older child felt that they were not receiving the support that they felt they needed.

"Have more effort into reasons behind my behaviour, how my mood was affecting my behaviour, taking my mental health more seriously and not saying 'it's just'." (11-17yrs)

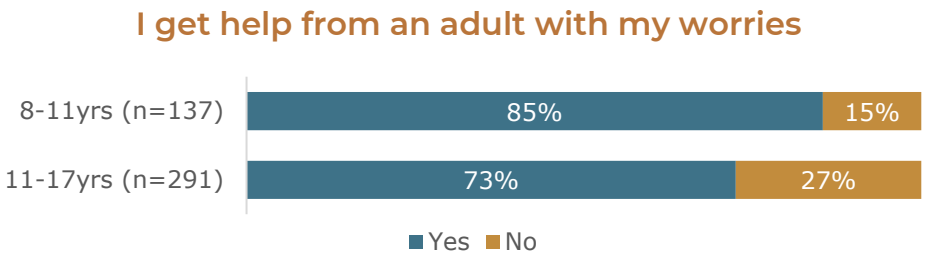


Figure 72. Getting help with worries from an adult

A substantial proportion (43% of children aged 8-11yrs and 37% of the older children aged 11-17yrs) hardly ever or never worried about their feelings or behaviour.

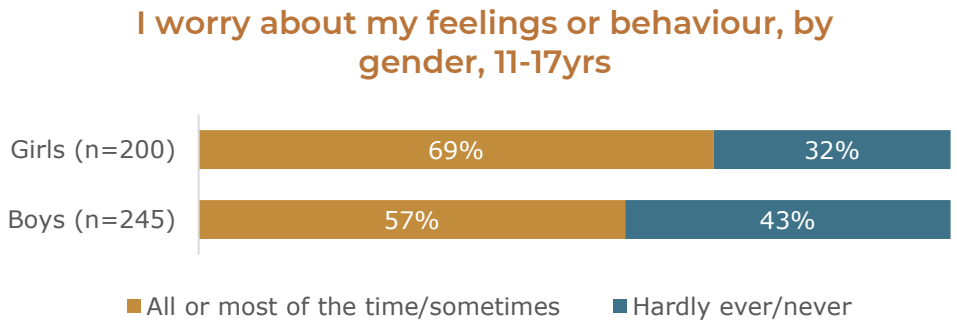


Figure 73. Worrying about feelings or behaviour, by gender, 11-17yrs

For the older children, girls were significantly more likely to worry about feelings or behaviour than boys (Figure 73, 69% as opposed to 57%), and a higher proportion of children living with their parents (44%) worried compared to those living with wider family or friends (34%) or were being cared for by foster carers (36%). Girls were less likely than boys to be getting support from an adult (69% to 76%), but this difference did not reach the level of statistical significance.

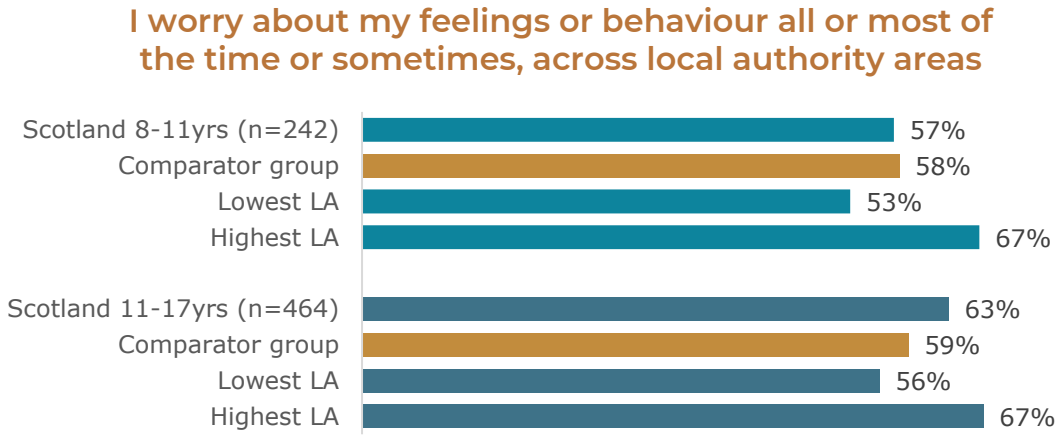


Figure 74. Worrying about feelings or behaviour all or most of the time or sometimes, across local authority areas

The proportion of children aged 8-11yrs worrying at least sometimes ranged from 53% up to 67% across local authority areas, and from 56% to 67% for older children aged 11-17yrs (Figure 74).

Happiness with appearance

The Good Childhood Reports, published by The Children's Society, are a series of annual reports on the wellbeing of children and young people in the UK. Each report explores the latest trends in the subjective wellbeing of children and takes quantitative evidence from two main sources: the UK Longitudinal Household Survey (known as Understanding Society) which includes a sample of children aged 10 to 15 who are interviewed each year, and the Children's Society's own annual household survey which includes children aged 10 to 17.

Analysis of the Understanding Society data in the Good Childhood Report 2023 (The Children's Society, 2023) showed that unhappiness with appearance was a strong predictor of children having low happiness with their lives a whole. The subsequent report in 2024 (The Children's Society, 2024) highlighted that children being unhappy with their appearance had been a recurring theme in recent years. Understanding Society data showed that 16% of children aged 10-15yrs gave low scores for happiness with appearance, and that girls were more likely to be less happy with their appearance than boys (23% of girls aged 0-15yrs compared to 9% of boys). Data from the Children's Society's (2024) own household survey of children aged 10 to 17 presented in the Good Childhood Report 2024 indicated that 12% of this group were less happy with their appearance. This data is more directly comparable to children taking part in Bright Spots because it includes 16 and 17-year-olds.

Bright Spots asked older children (11-17yrs) if they were happy with the way they looked using a 0-10 scale with 0 indicating 'Not at all happy' and 10 indicating 'Completely happy'. Children who gave a score of 0-4 were understood to have 'low' happiness, 5-6 'moderate' happiness, and those who scored themselves on the scale as 7-10, as having 'high' happiness with their appearance.

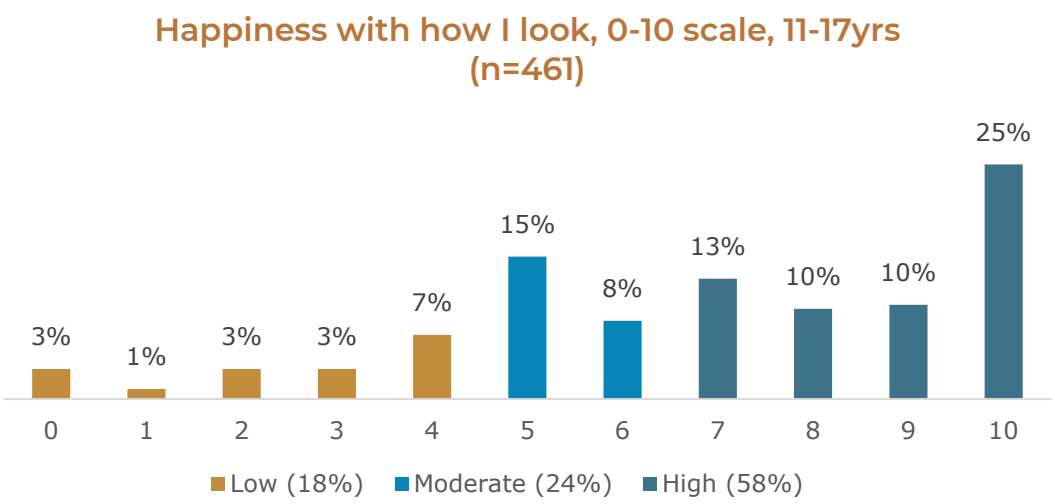


Figure 75. Happiness with appearance on a scale of 0-10, 11-17yrs

A quarter of the children (11-17yrs) chose 10 (completely happy), and the majority of children (58%) gave high scores (from 7 to 10) for happiness with how they looked. A quarter (24%) gave moderate scores (5 or 6), and 18% gave low scores (4 or less) for happiness with how they looked (Figure 75).

"I love it, like I enjoy living here, it's boosted my confidence, I have developed into a beautiful young lady." (11-17yrs)

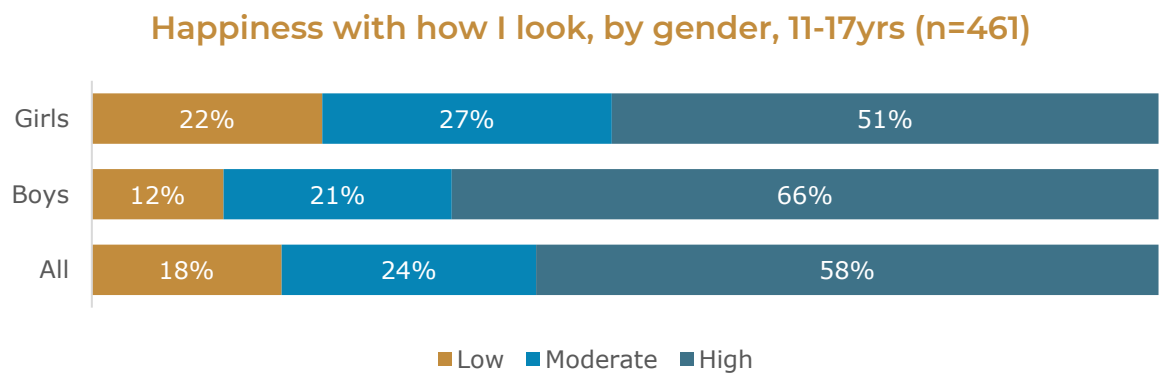


Figure 76. Happiness with appearance, by gender, 11-17yrs

The proportion of girls with low happiness with how they looked (22%) was approaching double that of boys (12%), which was a statistically significant difference (Figure 76).

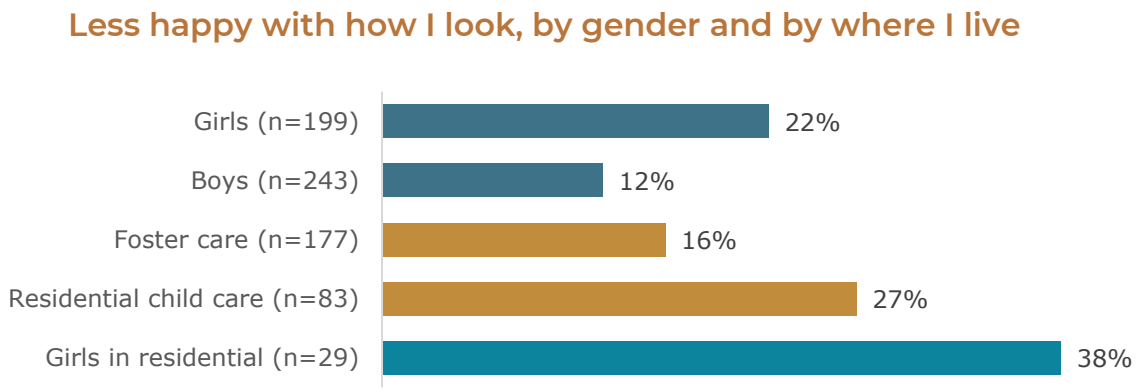


Figure 77. Low scores for happiness with appearance, by gender and type of care

A significantly higher proportion of older children (11-17yrs) living in residential child care were unhappy with their appearance (27%) compared to those living in foster care (16%). The proportion of girls living in residential child care who were unhappy with their appearance was 38%, much greater than girls living with wider family or friends (17%), and those living with their parents (13%). One girl living in residential child care explained how she felt:

> *"They [staff] body shame me. They tell me to stop eating and also to eat more and I am really upset about that. They say I am lazy because I am in my room." (11-17yrs)*

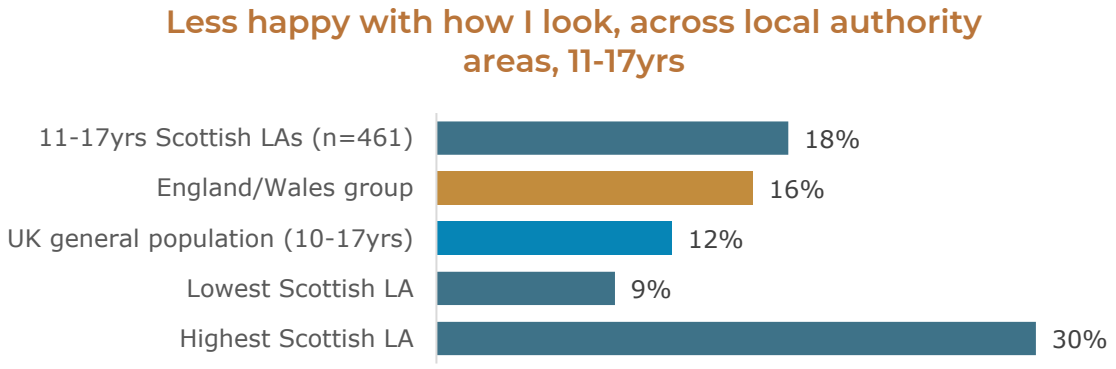


Figure 78. Less happy with appearance, across local authority areas, 11-17yrs

The proportion of older children (11-17yrs) with low happiness with their appearance (18%) was well above that of children aged 10-17yrs in the general UK population (12%, The Children's Society, 2024), and varied

dramatically across the Scottish local authority areas, ranging from just 9% up to 30%, a rate over three times higher (Figure 78).

Life getting better

Many of the children and young people involved in the focus groups that helped develop the Your Life, Your Care surveys were keen to stress that their lives were getting better (Selwyn & Briheim-Crookall, 2022).

The Bright Spots surveys asked children (8-17yrs) 'Is your life getting better?' and they could choose to answer 'Much better', 'A bit better', 'No change', 'A bit worse' or 'A lot worse'.

Despite the trauma that many of children may have experienced before and sometimes during their time in care, the majority answering the surveys - four in five - felt that their lives were improving (80%, Figure 79).

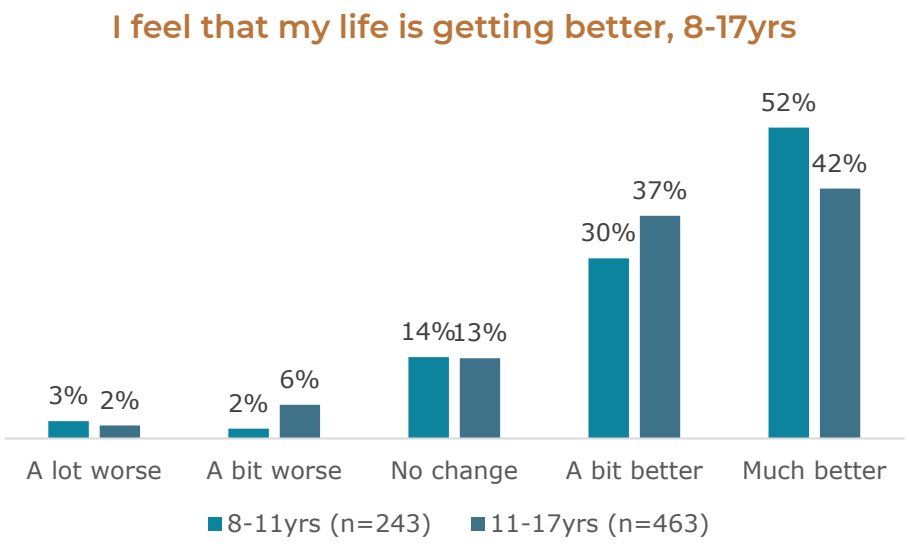


Figure 79. Feeling that life is getting better, 8-17yrs

Over half (52%) of the children aged 8 to 11-years-old felt that their lives were getting much better, with another 30% feeling that their lives were getting a bit better. Just 5% felt that their lives were getting a bit or a lot worse.

"I am happy being in a good home where I am looked after well." (8-11yrs)

"When I first came in, I was very nervous and I didn't speak. But it got better and I started talking and it's good now." (8-11yrs)

79% of the older children (11-17yrs) felt that their lives were getting a bit or much better, and 8% felt that their lives were getting a bit or a lot worse:

> *"I know being with my mum or dad wouldn't work and my life has got better since being in care." (11-17yrs)*

> *"It has made my life better. I am a lot happier, cleaner and organised." (11-17yrs)*



Figure 80. Feeling that life is getting much or a bit better, across local authority areas, 8-17yrs

Across local authority areas in Scotland, we can see that the percentages of children aged 8-17yrs who felt their lives were getting much or a bit better ranged from 86% in one area to 67% in another area, where one in three children (33%) felt that their lives were not getting better (Figure 80).

The general wellbeing of children aged 4-7yrs and 8-11yrs

Younger children (4-11yrs) were also asked if they felt happy the previous day, and their answers give an indication of how they were feeling at the point they took part in the Bright Spots surveys.

Bright Spots asked children aged 4-7yrs and 8-11yrs how happy they felt the previous day using a 5-point scale which ranged from 'Very unhappy' to 'Very happy'.

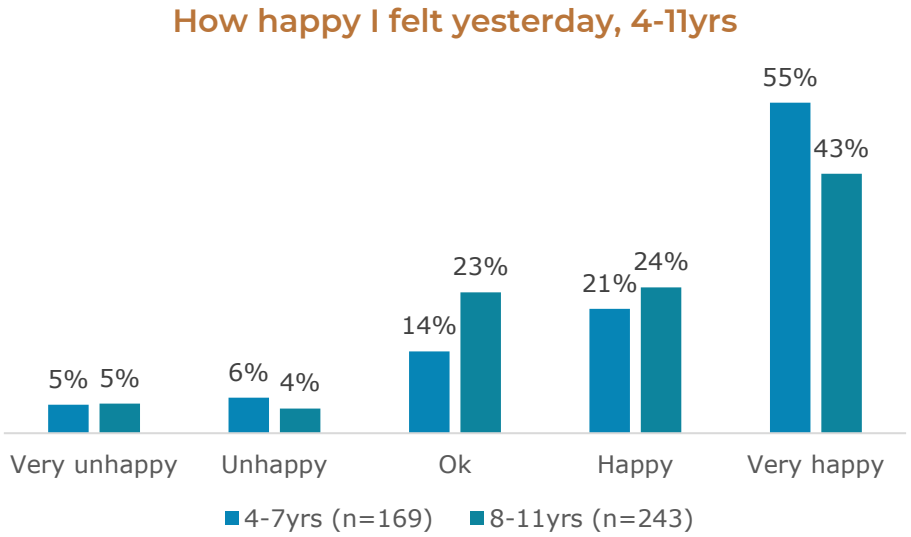


Figure 81. Happiness yesterday, 4-11yrs

A large majority of children felt happy the previous day. Just over three quarters (76%) of the children aged 4-7yrs were happy or very happy. Younger children who felt happy talked about the people they lived with and how they cared for them. They enjoyed taking part in family life, doing activities, playing with toys and having treats:

> *"I am so happy and I love the grown ups that look after me!" (4-7yrs)*
>
> *"My foster carer looks after me and gives me food. At the weekend I get to stay up late." (4-7yrs)*
>
> *"Dinosaurs make me happy, T-Rexs and everything else." (4-7yrs)*
>
> *"It's the best. The way I treat them and the way they treat us. We are family. She does everything for me and takes me places!" (4-7yrs)*
>
> *"It's fun, it's the best thing ever. I like having my two little brothers [foster carer's sons]." (4-7yrs)*
>
> *"I want to stay there forever and ever and all the days." (4-7yrs)*

Two-thirds of the children aged 8-11yrs felt happy or very happy. These children also talked about how the people they lived with responded to their needs, and how they had a sense of safety and stability:

> *"It is the best because I get Greggs [bakery products] all the time." (8-11yrs)*
>
> *"It's really nice and steady living here." (8-11yrs)*

"What else I want to say is that I would never go anywhere else because I know I am loved and cared for where I am." (8-11yrs)

"I am happy being in care because it makes me feel safe." (8-11yrs)

"I love living here, they always do stuff for me." (8-11yrs)

Around one in 10 of the younger children (4-11yrs) felt unhappy or very unhappy the previous day. 6% of the youngest children felt unhappy and a further 5% felt very unhappy the previous day (4-7yrs). Relationships with the people they lived with and with family they did not live with were most often the reason for them feeling unhappy:

"When I am feeling sad, she always gives me hugs." (4-7yrs)

"Sometimes my Dad gets mad at me." (4-7yrs)

"My tummy mummy doesn't want me to stay with her and she wants me to live with my mum (gran). She doesn't like me. It makes me feel angry and upset and that's all." (4-7yrs)

4% of the children aged 8-11yrs felt unhappy the previous day and 5% felt that they were very unhappy. Again, relationships with people they lived with, and missing family, were some of the reasons behind this.

"It's ok but I want to go home. I like [carer] and [carer] because they care about and do fun things with me. They'd be smacking and hitting me if they didn't care about me. They wouldn't be in this job if they didn't care." (8-11yrs)

"Not having a gran that's in a mood all the time." (8-11yrs)

Overall low wellbeing (4-11yrs)

One of the strengths of the Bright Spots survey data is that it offers the opportunity to explore the relationship between answers about overall wellbeing and other specific elements of the children's experiences, such as where they are living and the extent to which they have supportive relationships.

Feeling happy or unhappy the previous day may be a passing phase which is influenced by many factors, so to explore if children who indicated that they were unhappy the previous day may have been experiencing low overall wellbeing, the answers they gave to other questions in the surveys were considered to get a fuller picture of their wellbeing.

Children who indicated that they were unhappy or very unhappy the previous day who also gave negative responses to multiple other questions were considered to have low overall wellbeing.

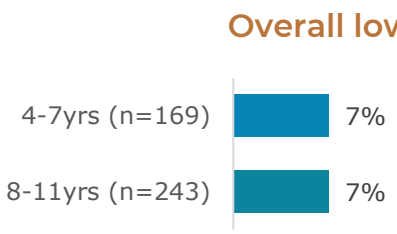


Figure 82. Overall low wellbeing, 4-11yrs

Of the 11% of 4-7-year-olds who were unhappy or very unhappy the previous day, 13 of these 18 children gave a negative response to at least one other question, and 11 gave negative responses to two or more other questions which suggested they may have been experiencing low overall wellbeing (7%, Figure 82). Seven of these 13 children didn't like school, five felt that adults didn't notice how they were feeling, four did not always feel safe at home, and three did not trust the adults they lived with.

Of the 9% of 8-11-year-olds who were unhappy or very unhappy yesterday, all gave at least one negative response to other questions, and 16 gave negative responses to at least two other questions, suggesting they may have been experiencing low overall wellbeing (7%, Figure 82). Fourteen of the 22 children worried about their behaviour all of the time, most of the time or sometimes. Seven of the 22 did not like school, and 14 were afraid to go to school at least some of the time because of bullying. Nine did not feel settled at home and eight did not feel safe at home. Six did not feel listened to when decisions were made about their lives, and five did not trust the adults they lived with.

The general wellbeing of children aged 11-17yrs

The Bright Spots survey for older children (11-17yrs) includes three questions that allow direct comparison with ONS data that covers the wellbeing of older children aged 10-15yrs in the general population.

In addition to these questions that allow comparison with the general population, older children were asked how positive they felt about their future. Bright Spots asked the older children (11-17yrs):

1. Overall, how satisfied are you with your life nowadays?
2. How happy did you feel yesterday?
3. Overall, to what extent do you feel the things you do in your life are worthwhile?
4. How positive are you about your future?

The children could use a 0 to 10 scale for their answers to each of these questions, with zero being the lowest point.

The ONS categorises 0-4 ratings as low wellbeing, 5-6 as moderate wellbeing, 7-8 high wellbeing and 9-10 as having a very high sense of wellbeing, and so Bright Spots uses the same categories, with a particular focus on children who indicate very high or low wellbeing.

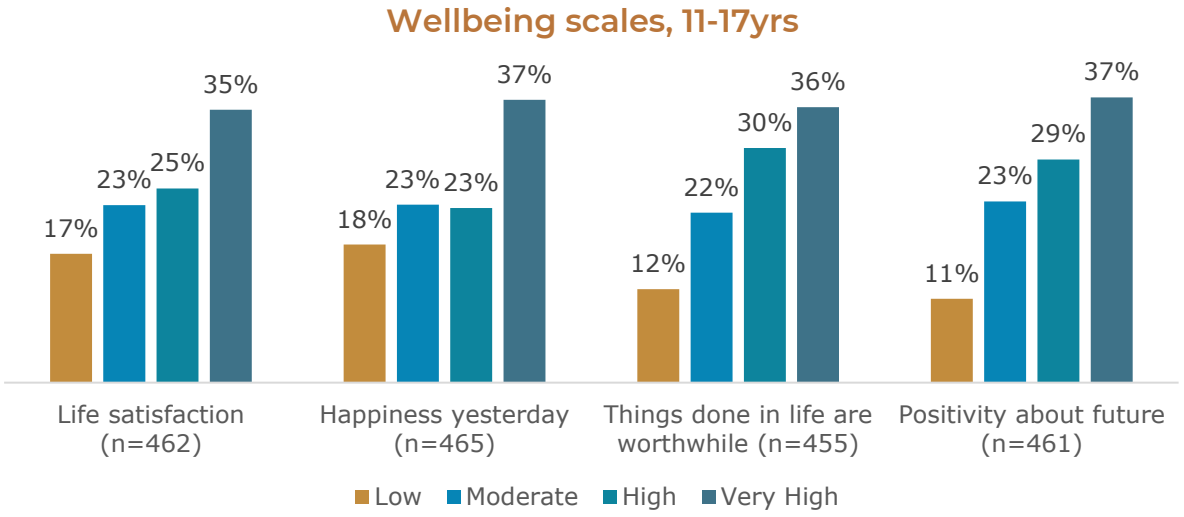


Figure 83. Wellbeing indicators, 11-17yrs

At least a third (35% to 37%) of the older children (11-17yrs) gave very high scores for each of these wellbeing indicators, and the proportion of them with high or very high scores ranged from 60% to 66% (Figure 83). For all questions, the percentages of older children giving very high scores were much greater than those giving low scores.

One child described their hopes for the future:

"I don't want to go down a bad path when I'm older. I want to get a job and get a car." (11-17yrs)

Percentages giving very low scores ranged from 11% to 17% across the four indicators.

Low scores in Scotland for each indicator are similar to those for the Bright Spots Comparator Group in England, as are very high scores for each indicator (Figure 84).

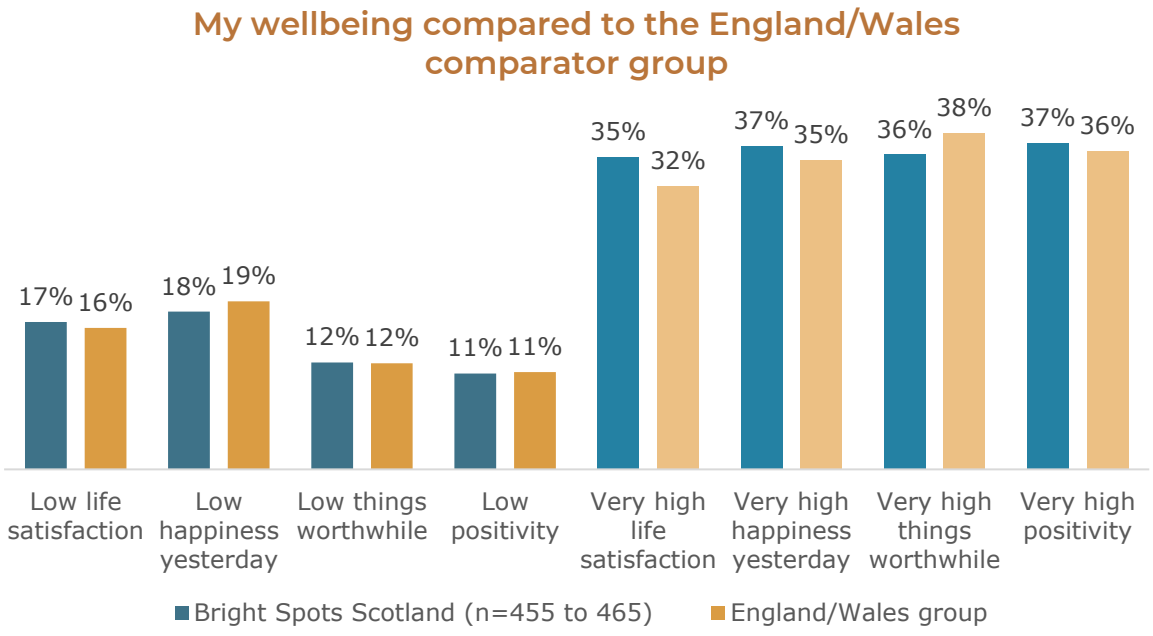


Figure 84. Wellbeing indicators comparison to England/Wales comparator group, 11-17yrs

When comparison is made with children in the general population in the UK, the picture becomes more complex. Using data from The Children's Society (2023) Household Survey from 2022-23, enables us to make the comparison. As The Children's Society Household Survey has data for children aged 10-15yrs, we used Scottish Bright Spots data for children aged 11-15yrs to allow a closer comparison. Figure 85 shows that the proportion of children from each group giving very high scores for each indicator is largely similar; but the proportion of children in care in Scotland who took the surveys and gave low scores for each scale is much higher than those given by their peers in the general UK population. The percentage giving low scores for life satisfaction was over three times greater (17% to 5%).

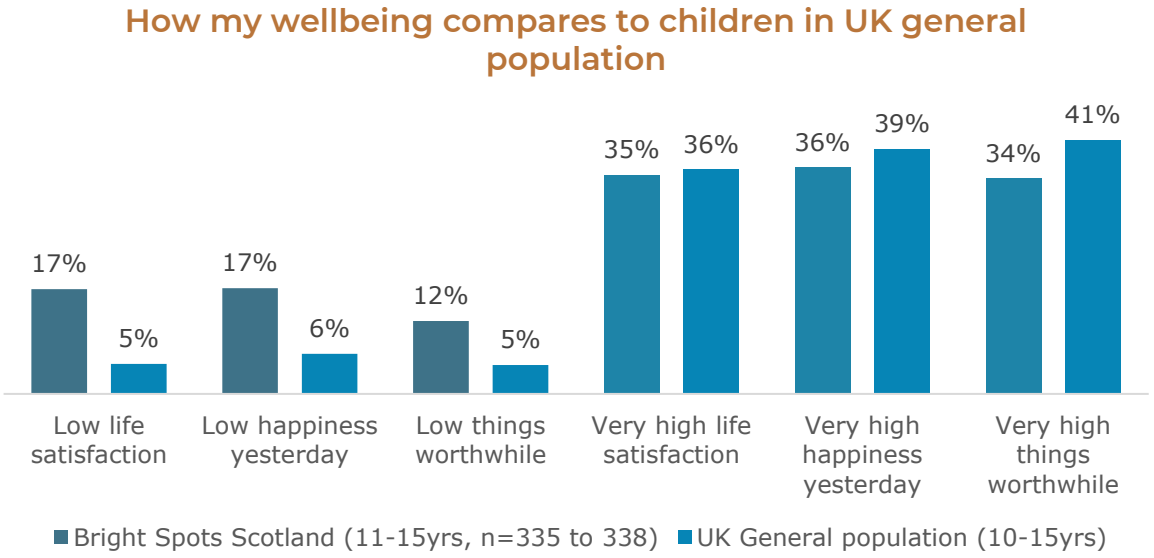


Figure 85. Wellbeing indicators comparison to children in the UK general population

A similar difference is evident for the how happy the children felt yesterday (17% to 6%). For the indicator about feeling that life is worthwhile, the proportion of children responding to the Scotland Bright Spots survey giving low scores was over double that of the UK general population (12% to 5%).

This suggests that while some of the children in care in Scotland who responded to the Bright Spots surveys appear to have been doing very well, the proportion who appear to be doing a lot less well is much greater than that of their peers. A substantially higher proportion of girls gave low scores than boys on all three of the Bright Spots' wellbeing indicators that allow comparison with the general population (Figure 86).

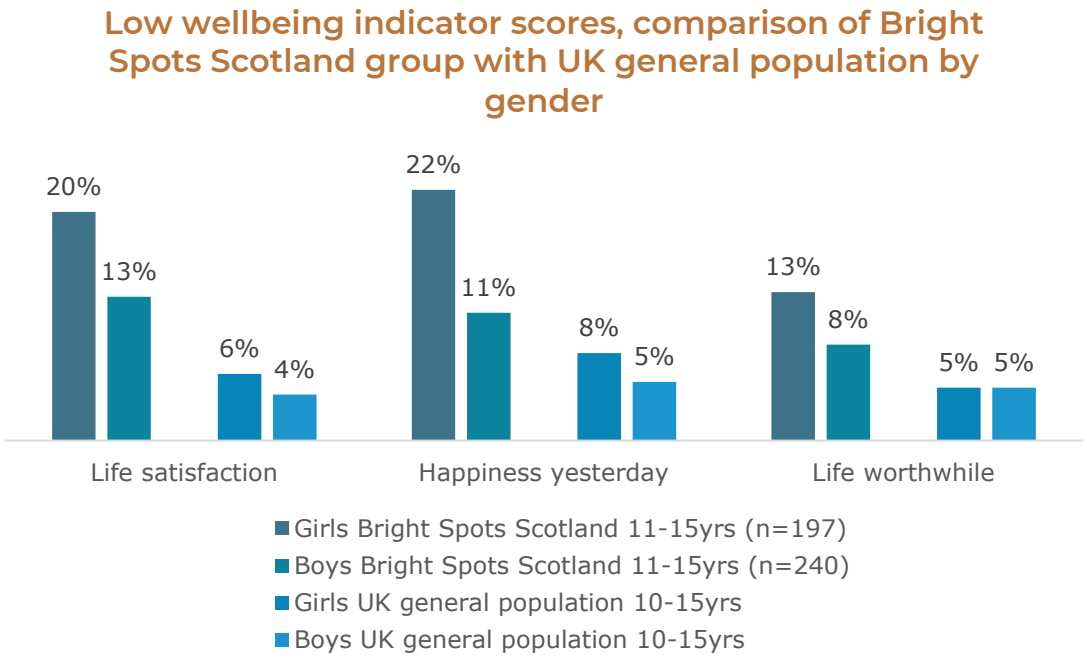


Figure 86. Low wellbeing indicator scores, comparison to UK general population by gender

The largest difference observed for how happy the children felt they were the day before taking the survey, was where the proportion of girls with low scores was twice that of boys. This difference is statistically significant. The gender difference is also evident in national general population data for children aged 10-15yrs for the life satisfaction and happiness yesterday indicators, but to a much lesser degree than for the children responding to the Bright Spots surveys in Scotland.

The extent to which differences in wellbeing between girls and boys are amplified for children in care demonstrates the need for agencies supporting girls in care to pay particular attention to these differences, and to work with girls to address elements of their experience that may contribute to feelings of low wellbeing.

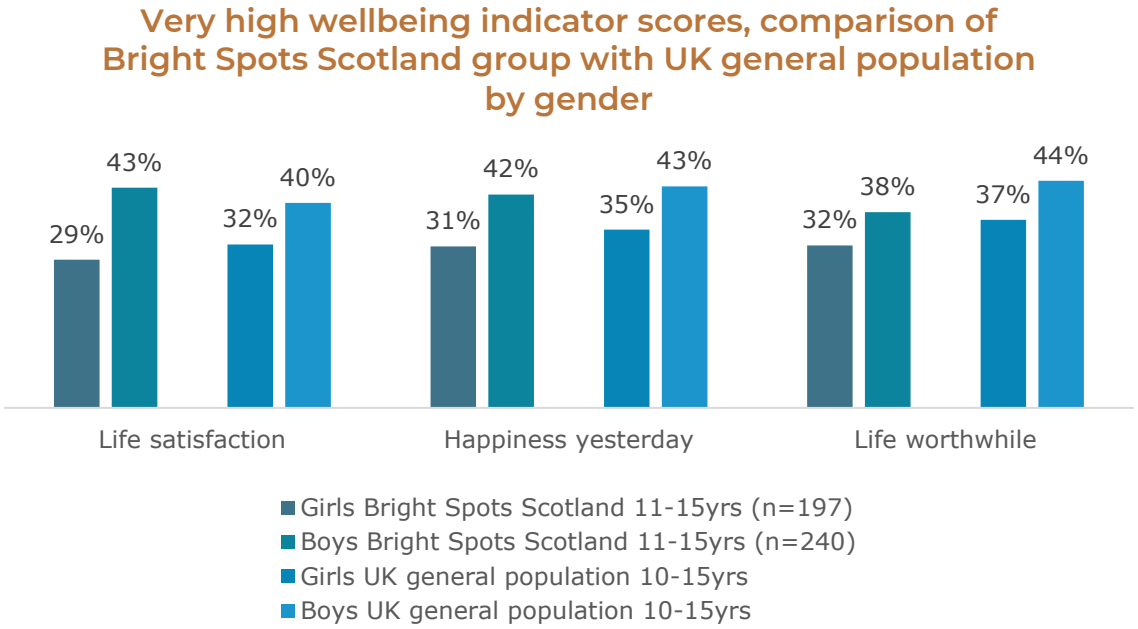


Figure 87. Very high wellbeing indicator scores, comparison to UK general population by gender

A higher proportion of boys than girls who completed the Bright Spots surveys in Scotland gave very high scores (9-10) for each wellbeing indicator, though the difference was not as marked as for those giving low scores (Figure 87). The gender difference mirrors that for the general UK population, and proportions are broadly similar.

Overall wellbeing of older children (11-17yrs)

For older children (11-17yrs), Coram Voice uses the four wellbeing scales in the Your Life, Your Care survey - life satisfaction, happiness yesterday, things done in life are worthwhile, positivity about the future - to distinguish children who have low overall wellbeing and those who have very high overall wellbeing. The same approach has been applied to Bright Spots data from Scotland.

Having determined the children with low overall wellbeing and with very high overall wellbeing, statistical tests were then used to determine other elements of their experience which have the strongest influence on both low and very high overall wellbeing. Coram Voice uses regression analysis because this approach considers the interplay between factors that are related to low and very high overall wellbeing, as some factors are likely to be related to each other. Primarily because of the smaller number of survey respondents in Scotland, regression analysis was not applied, and this is explained further in Appendix 2.

Tests of association were applied to factors individually to determine the strength of their relationship to the children's low and very high overall wellbeing. Although this method does not account for the interplay between factors, the factors with the strongest relationship to children's low and very high overall wellbeing are very similar to those identified by Coram Voice using regression analysis.

Overall low wellbeing (11-17yrs)

To determine what influences low overall wellbeing, we looked at the other responses from children (11-17yrs) who responded to the Bright Spots surveys in Scotland who had rated their feelings about two or more of any of the four wellbeing scales as 0-4 out of 10.

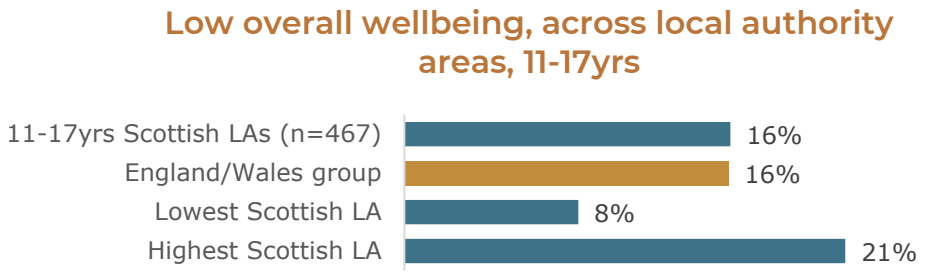


Figure 88. Low overall wellbeing, across local authority areas, 11-17yrs

One in six of the older children (11-17yrs) gave responses that suggested they had low overall wellbeing (16%, Figure 88). In four of the six Scottish local authority areas, around one in five children gave responses suggesting low wellbeing (19% to 21%), with the other two areas having much lower proportions (12% and 8%).

When tests of association were applied (see details in Appendix 2), most other elements of experience covered by the survey were shown to have a statistically significant relationship with low overall wellbeing. The strongest associations were where children:

- Felt that their life was getting a bit or a lot worse
- Were less happy with the way they looked
- Worried about their feelings or behaviour all or most of the time
- Felt they weren't being listened to when decisions were made
- Felt that they hardly ever or never trusted the adults they lived with
- Felt less safe and settled at home
- Didn't talk regularly to adults at home about things that mattered to them

- Felt that the adults they lived with did not notice their feelings all or most of the time.

Older children (11-17yrs) described experiences that affected their feelings of wellbeing. These included not feeling in control of their lives and uncertainty about what was ahead of them.

> *"When I was in residential and foster care I didn't feel cared for. I wasn't happy about moving and staying in certain places. I was happy sometimes in these places but sometimes I really wasn't. People at my hearings didn't always make the right decisions." (11-17yrs)*

> *"It's been pretty shit and I want things to be different but I'm panicking about having to move before I'm ready to." (11-17yrs)*

Some older children were unhappy about how they perceived they were treated by their carers:

> *"… Not to be restrained. There should be better ways of supporting young people. Cos it's not normal in families and so shouldn't be allowed in care. It's not normal anywhere else in life so being restrained shouldn't be allowed in care." (11-17yrs)*

> *"If my carers would understand me more & not treat me like a foster kid." (11-17yrs)*

The pull of family was strong for some children:

> *"I would like to be out of care completely and back with my family. I don't know why I am in care - I know they didn't do anything wrong." (11-17yrs)*

Very high overall wellbeing (11-17yrs)

To determine what influenced very high overall wellbeing, we looked at other responses of the children (11-17yrs) completing the Bright Spots surveys in Scotland who had rated their feelings about two or more of any of the four wellbeing scales as 9 or 10, out of 10.

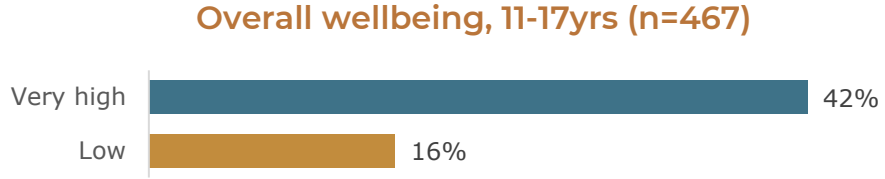


Figure 89. Overall wellbeing, 11-17yrs

Two in five of these older children (11-17yrs) were considered to have very high overall wellbeing (42%). The percentage of the older children (11-17yrs) found to have very high overall wellbeing was over two and half times greater than the number with low overall wellbeing (42% to 16%, Figure 89).

In one local authority area, over half of the children aged 11-17yrs gave responses indicating high wellbeing (54%), with responses in the other areas ranging from 44% to 33% (Figure 90).



Figure 90. Very high overall wellbeing, across local authority areas, 11-17yrs

When tests of association were applied (see details in Appendix 2), most other elements of experience covered by the survey were shown to have a statistically significant relationship with low overall wellbeing. The strongest associations were where children:

- Felt more happy with how they looked
- Felt listened to when decisions about their life were being made
- Felt that the adults they lived with noticed their feelings all or most of the time
- Had the chance to show they could be trusted
- Felt they regularly talked to adults about things that mattered to them
- Felt that life was getting better
- Trusted the adults at home all or most of the time
- Always felt settled at home.

The older children described feeling that where they were living was right for them, with carers who trusted and supported them:

> *"Where I live is a good place to live and I am happy!" (11-17yrs)*
>
> *"…pretty much everything is perfect in my life. I would just like to see my family in [other country] more often." (11-17yrs)*
>
> *"My carers are supportive. I get help with things and they are caring." (11-17yrs)*

> *"I feel like I can be trusted more. My carer can trust me to go to the shop and going to the park, walking to school and going for a run. My carer makes me safe, and her brother who helps me with my school work, he is very good at that. When I said to my carer I wanted a job she said that I can be more confident and that's a good step for me. It can help me preparing for the adult world." (11-17yrs)*

> *"It's been the best experience because I get to know different families. Like meet people who did things I was interested in like washing the buses with 1 Foster carer. Doing different activities has been important. I have been really well taken care of by my different carers. Made me feel welcome and they noticed I was sad. And fed well. Now I am part of this family now and it feels good. When I was living at home I wasn't going to school and social work got involved." (11-17yrs)*

For some, this contrasted with previous experiences in other places where they had lived:

> *"I was unhappy where I lived with foster carers in the middle of nowhere and have been really happy since I have moved to my own flat in [city]." (11-17yrs)*

> *"I am really happy with my new foster carer, the placement is much better than the old one." (11-17yrs)*

> *"I have had a more positive experience in my current home, a residential home, than what I did in foster care as I got moved around quite a lot and had to say goodbye on lots of occasions." (11-17yrs)*

Many of the factors most strongly associated with low overall wellbeing were also strongly associated with very high overall wellbeing, with the addition of children getting the chance to show that they could be trusted. Worrying about feelings and behaviour and feeling safe at home were less strongly associated with very high overall wellbeing than they were with low overall wellbeing, whereas always feeling settled at home had a stronger association with very high overall wellbeing.

The factors associated with overall wellbeing are summarised in Figure 91.

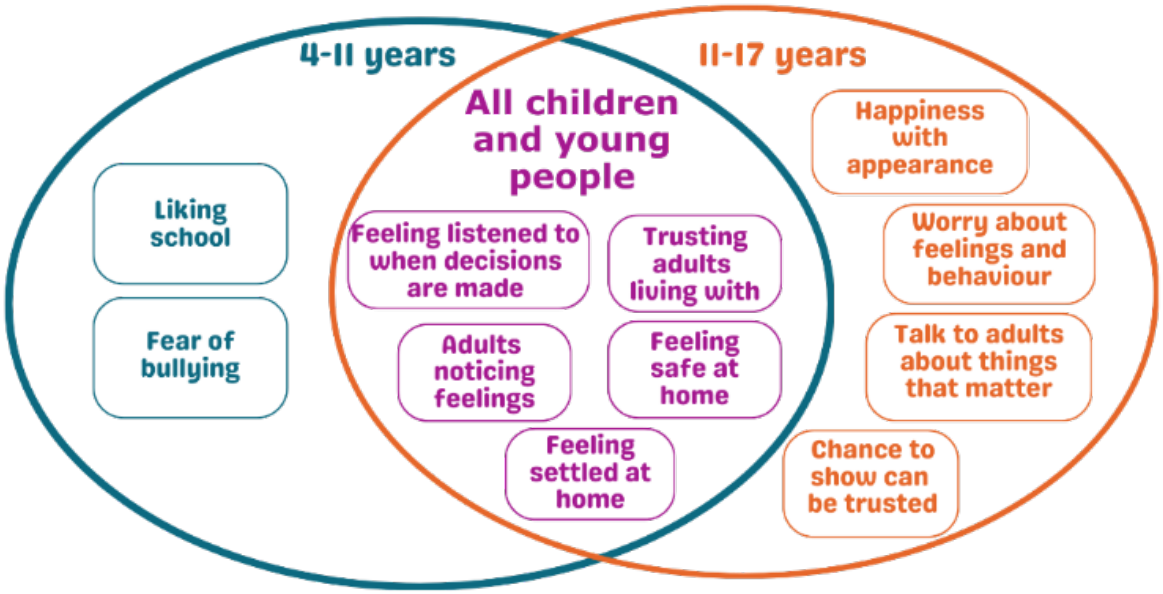


Figure 91. Factors most strongly associated with low and very high overall wellbeing

The factors that most strongly associated with wellbeing for children of all ages included trusting the adults they lived with and adults noticing how they were feeling, as well as feeling safe and settled at home and feeling listened to when decisions were made about their lives. A child who trusts the adults they live with is much more likely to have very high overall wellbeing, and a child who does not trust the adults they live with is much more likely to have low overall wellbeing. Liking or disliking school, and if they were or were not afraid of bullying, were also strongly associated with wellbeing for younger children (4-11yrs). Other factors associated with overall wellbeing for older children (11-17yrs) were how happy or unhappy they were with how their appearance, whether they worried about feelings and behaviour, if they felt they could talk to adults about things that matter or not, and getting the chance to show that they could be trusted.

The importance of positive supportive relationships to children experiencing overall wellbeing comes through very clearly from the responses to the surveys, as does whether a child feels safe and settled where they live. Although just 2% of older children (11-17yrs) hardly ever or never felt safe at home, all of them had low overall wellbeing.

Summary – Overall Wellbeing

- Just over six in 10 children (8-17yrs) worried about their feelings or behaviour at least sometimes, and one in 10 worried all or most of the time. Most children who worried about their feelings or behaviour felt that they were getting help from an adult, but 15% of the children aged 8-11yrs and 27% of older children (11-17yrs) felt that there were not receiving this support.
- Almost three in five older children (11-17yrs) gave high scores when asked to rate their happiness with how they looked (58%), but 22% of girls gave low scores compared to 12% of boys. Older children living in residential child care tended to be less happy with their appearance (27%) than children living with foster carers (16%), with girls living in residential child care most likely to feel dissatisfied with their appearance (38%).
- Four in five of the children aged 8-17yrs who responded to the surveys felt that their lives were improving (80%).
- Just over three quarters (76%) of children aged 4-7yrs were happy or very happy the previous day.
- 7% of younger children (4-11yrs) were unhappy the previous day and gave answers to other questions which suggested they were experiencing low overall wellbeing.
- At least a third of the older children (11-17yrs) gave very high scores for each of the four wellbeing indicators - life satisfaction, happiness yesterday, things done in life are worthwhile, positivity about the future - with the percentage of children giving low scores ranging from 11% to 17%.
- Responses from children in care in Scotland for each of the four core wellbeing scales were similar to those who have taken the Bright Spots surveys in England and Wales. However, when compared to the feelings and experiences of children in the general UK population using three of the wellbeing indicators, a much higher percentage of children in care in Scotland giving low scores for each indicator stands out.
- The percentage of the older children (11-17yrs) found to have very high overall wellbeing was over two and half times greater than the number with low overall wellbeing (42% to 16%).

- The proportion of the older children (11-17yrs) with low overall wellbeing across the six local authority areas ranged from one in 12 to one in five, and the proportion with very high overall wellbeing ranged from one in three to one in two.
- Girls generally gave lower scores or ratings on the wellbeing indicators than boys, amplifying the gender differences seen in the general population. This includes happiness with their appearance and worrying about their feelings and behaviours, but the difference was most pronounced for feeling happy yesterday, with twice as many girls as boys giving low scores.
- Factors most strongly associated with the wellbeing of the children of all ages who took the surveys included trusting the adults they lived with and adults noticing how they were feeling, as well as feeling safe and settled at home and feeling listened to when decisions were made about their lives.
- The marked variation across local authority areas in the proportion of children experiencing low overall wellbeing and low scores on other questions relating to wellbeing suggests that it may not be inevitable that a high proportion of children in care will experience low wellbeing. The findings lead us to question to what extent are local practices and supports responsible for the differences seen?

Discussion and recommendations



Discussion and recommendations

The primary purpose of the Bright Spots programme is to enable corporate parents and partner agencies to improve the services and support they provide to children in care and care leavers, based on the evidence provided by responses to the Bright Spots surveys. Each of the local areas that took part in the Bright Spots Programme pilot in Scotland received the responses to the surveys and the analysis of these shortly after the end of their phase of the pilot. The areas have been working to address the feedback the children and young people they care for, and their care leavers, have given them, through their local services to support them. By bringing together the survey results from all six local authority areas that have participated in Scotland in 2022 and 2024, in this analysis and report on the full Bright Spots pilot, we also have a new, broader knowledge base that complements and often reinforces other sources of information about the wellbeing of children in care and care leavers in Scotland in recent years.

In this section, we consider key learning points and general recommendations for corporate parents and agencies supporting children in care based on this evidence. This knowledge base can also be used to inform the ongoing process of policy development to improve support children in Scotland.

Enable all children in care to thrive

Many children in care who took the survey appear to be thriving, with the level of very high scores on wellbeing indicators being similar to the proportion of their peers in the general population who record positive wellbeing. Concerningly however, too many children in care appear to be struggling compared to their peers, with much higher proportions of children in care giving low scores on wellbeing indicators, that cannot be explained by the more universal or more commonly shared experiences of growing up, such as disliking school or being less trusting of the adults a child lives with. For example, while it is not unusual for children to find the behaviour of adults embarrassing at times, when the behaviour of adults draws attention to a child being in care, this can make children feel different to their peers and experience stigma that is very specific to their circumstances.

More can be done to address key factors that should enable all children in care to thrive. Relationships with adults who were responsive and supportive were

strongly associated with low and very high overall wellbeing for children in care in Scotland. Other key factors influencing wellbeing were how happy children were with how they looked and the extent to which they worried about their feelings and behaviour. Feeling safe and settled at home strongly influenced wellbeing too. For younger children, how they felt about school and fear of bullying were also strongly associated with wellbeing. Addressing these factors is key to support children in care in ways that are likely to have a positive impact on their wellbeing.

Recommendation 1: Every child in care needs and has a right to a safe and comfortable home and the supportive relationships that enable them to develop and learn and give them every opportunity to thrive. Learning from and responding to what children have shared through the Brights Spots Programme is key here and there must always be opportunities for children's voices and experiences to be heard and be listened to. Children should be regularly asked about their views, feelings and wellbeing by support practitioners. This is an essential component of how corporate parents from all agencies, across Scotland, can work to ensure that there is sufficient and equitable support for all children.

Relationships

Although a large majority of children who shared their experiences through the Bright Spots surveys in this Scotland pilot experienced supportive relationships that are so critical to their sense of wellbeing, this was not the case for every child who responded. Children living in residential child care and others who were living somewhere else other than with parents, wider family or friends or with foster carers, were less likely to have a good friend, to trust the adults they lived with, or to feel that these adults noticed their feelings or talked to them about things that mattered to them, compared to those living with families.

Recommendation 2: Particular attention must be paid to the need for children being cared for in residential child care and other non-family environments to have the same opportunities to develop and maintain supportive relationships as children who are being cared for in family environments. All corporate parents have a responsibility and a part to play in creating the conditions where all children are able to feel that they can trust those they live with, in an environment where they feel they can safely share their thoughts and feelings.

Specific emphasis must be placed on children having every opportunity to be able to maintain their existing friendships and to develop new friendships.

Rights

All children have a right to feel safe, settled and listened to. Through their survey responses, some children shared that they did not feel safe or settled where they lived, felt that adults around them made them feel embarrassed about being in care, and felt that their views were not always listened to or taken seriously.

The UNCRC (1989) asserts that all children have a right to feel safe where they live, to be listened to and their views taken seriously, and to not experience stigma. The UK ratified the UNRC in 1991 and it was incorporated into Scots Law in 2024. For some children, it appears that they do not feel that these rights are being upheld.

Recommendation 3: Every effort should be made to ensure that all children in care are aware of their rights under the UNCRC in a way that is appropriate for their age and stage of development, and these rights must be understood, respected and promoted by everyone providing care for children and young people. Our findings suggest that there is a particular need for corporate parents to consider further how the rights of children living away from a family setting can be upheld and how these are explicitly discussed with children so that they are more able to explore and exercise their rights.

Families

As with all children, children needing care and protection can often experience complicated family situations and have complex feelings about their relationships with other members of the family. Relationships can be particularly complex for children in care who live apart from parents and siblings.

The surveys ask only about seeing parents and siblings, and do not explore how children keep in touch with family members who they do not live with and do not see, although some children did mention other arrangements to keep connected such as letter writing in comments they made. These alternative arrangements to keep in touch are very important for everyone concerned, but the surveys provide very limited information on how children felt about them.

How children who did not live with their family members felt about how often they saw them varied. Some of the children saw some of their siblings but not all of them; some of the children would have liked to see family members individually and not all at the same time; and some children wanted to see more of some of their family members and less of other family members.

Recommendation 4: The views of children about which family members they would like to see and how they would like this to happen must be considered and reviewed regularly to reflect changing circumstances, changing feelings and the nature of human relationships. Children must be supported to navigate their family relationships and understand the reasons for decisions that affect these relationships.

Geography

Across the six local authority areas participating in the Bright Spots pilot in Scotland, there was substantial variability in different aspects of experiences based on the local authority area that the children in care lived in.

Recommendation 5: To support every child and young person in care well, the services, opportunities and their experiences of care should not depend on which local authority area they live in. There needs to be continued, concerted effort by national and local government, and multi-agency networks, to ensure there is equity across Scotland. Key to this is sharing and spreading positive practice, new ways of working and models of delivery and implementing improvement and change that can be shown to be making a difference to the lives of children, young people and their families.

Understanding

Many of the younger children whose views and experiences were collected by the Bright Spots surveys felt that why they were in care had not been explained to them by an adult and many did not know who their social worker was. Most of the children who felt why they were in care had not been explained to them were living with their parents or with wider family or friends, and some of these children were not aware that legally they were actually 'in care'. This does not necessarily imply negative action: it may be to protect some children from undue stress and uncertainty.

Recommendation 6: Particular sensitivity is needed when talking to the youngest children in care to ensure that they have the information they need to understand and make sense of their situation. This needs to reflect an understanding of each individual child in order to ensure this is done without causing undue distress. Assumptions about what a child knows and understands should not be made, particularly as they grow and develop greater awareness.

Limitations of the Bright Spots programme pilot in Scotland

There are a few limitations to the Bright Spots programme and the Scottish pilot's findings that should be considered when drawing inferences from the results.

There was variation across the six local authority areas taking part in relation to their size of population, the number of children they care for, their geographical spread and the context in which they participated in the Bright Spots programme.

The general population size for each local authority area ranged from approximately 93,000 to 265,000, and physical land area from approximately 70 to 2,450 square miles. The total number of children in care who responded to the surveys across all age groups from 4-17, in each of the local authority areas, ranged from 58 to 249. Therefore, where the findings show percentage variation between local authority areas, it should be noted that because of the small numbers of children in the smaller local authority areas, one child could represent as much as 2% of all the children responding from that area.

We should also highlight that some of the local authorities questioned the appropriateness of some questions for particular groups of children. For example, as Scotland has a higher population of children being 'looked after at home' by their parent or parents supported by social services with a Child Supervision Order in place, or being cared for by wider family and friends (kinship care), than in England, some children, particularly younger children, were unaware of or did not understand their 'in care' status until they were asked to take the survey. Another example was where a refugee or asylum-seeking child were faced with the survey question about how often they see their family. This was in part attended to by one of the strengths of the Bright Spots programme which is the inclusion of the 'Trusted Adult' role to assist with the dissemination of the surveys and subsequent follow-up afterwards. The inclusion of a trusted adult is mandatory for the youngest age group (4 to 7-year-olds), but for those aged 8 and above, having a trusted adult to help them complete the survey is optional. So, for children who have (or choose to have) a trusted adult, the trusted adult has the opportunity to help explain questions or to miss out questions that are not appropriate or relevant for the child they are supporting.

There were also queries about how children whose first language was not English would understand the surveys, as these are not provided in other languages. Translating the surveys into other languages and maintaining these versions would be a sizeable task requiring substantial resource commitment. It was expected that local authorities would already have found ways to communicate with the children in their care who have limited understanding of English, and selection of appropriate Trusted Adults could assist with this. Some local authorities provided examples of other ways in which they supported their children with the surveys, which included providing interpreters and using Google Translate.

Local authorities also queried the extent to which the youngest children in the 4-7-year-old group might not understand some of the questions. A role of the Trusted Adult is to explain the questions in a way that children would understand and to skip questions that are not appropriate for a child they are supporting.

The first pilot ran towards the end of the COVID-19 pandemic from January to March 2022. This had some impact on the extent to which the three local authorities were able to disseminate the surveys and run engagement events with their children. For example, there were some increased staffing capacity issues due to illness, working with the logistics of lockdown restrictions, and the cancellation or rescheduling of awareness raising events. The COVID-19 restrictions, including lockdowns, may also have impacted on how children experienced their wellbeing during this particular time, compared with the three local authority areas who participated in the second phase of the pilot. As we are not drawing comparisons of the differences in responses between the two pilot groups at this time, we do not have a full picture of the potential impact of the COVID-19 pandemic and associated public health restrictions between the two groups.

We also compared how well children who answered the Bright Spots surveys in Scotland between 2022 and 2024 are doing in relation to the comparator group who participated in Bright Spots in England and Wales between 2015 and 2020. While it is still helpful to get a sense of how Scotland's children are doing compared to elsewhere in the UK, it should be noted that we are not comparing children who completed the Bright Spots surveys during the same timeframe, although findings for wellbeing indicators are very consistent across both groups despite the different timeframes.

In terms of the sets of questions used for the surveys, there are two things to note. Firstly, we added an open question to the pilot's second phase surveys to

ask children to tell us more about feeling safe where they live, so that we could understand more about why children felt safe or unsafe where they lived. And, secondly, we also adjusted the wording of some of questions used by the Scotland pilot from some of the questions in the surveys completed by children in England and Wales. This meant that we could not compare like for like for those questions. For example, there was a question for 11–17-year-olds about the number of 'placements' they experienced while in care that we changed to the number of 'moves' experienced instead. Another example was the questions about seeing family for 8–17-year-olds which were previously under the header 'Contact with your family'. This was changed to 'Time with your family', and the open question about their thoughts on how much 'contact' they had with their birth family was changed to their thoughts on how much they 'see and stay in touch' with their birth family. These two changes reflect how Scotland is working to address the impact of what children have told us about 'system' language that can be othering and stigmatising.

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Appendix 1. Statistically significant differences

Question	Age group	Difference between	Statistical test value	Degrees of freedom	Base number of children	p-value
I trust the adults I live with	8-11yrs	Residential child care: foster carers, wider family or friends	X^2=15.341	8	238	<.001
I trust the adults I live with	11-17yrs	Residential child care: foster carers	X^2=45.967	8	462	<.001
Not having a really good friend	8-17yrs	Residential child care: wider family/friends, parent(s), foster carers	X^2=48.640	4	703	<.001
Why in care explained	4-17yrs	Age of child	Kruskal-Wallis 106.355	2	862	<.001
Why in care fully explained	4-17yrs	Knew social worker: did not know social worker	X^2=31.365	2	868	<.001
Why in care fully explained	11-17yrs	Moved up to 3 times: moved 4 or more times	X^2=13.500	4	440	.009
Not feeling safe at home	4-7yrs	Scotland: England/Wales	X^2=12.358	1	1,652	<.001
Always feeling safe at home	4-17yrs	Foster carers: wider family/friends, parent(s), residential child care	X^2=20.573	4	869	<.001
Always feeling safe at home	11-17yrs	Seeing siblings just right: too little	X^2=31.519	3	649	<.001
Not always feeling settled at home	4-17yrs	Residential child care, somewhere else: parent(s), wider family or friends, foster carers	X^2=70.530	4	872	<.001
Always feeling settled at home	11-17yrs	Always feeling safe at home: not always feeling safe at home	X^2=336.335	9	463	<.001
Liking bedroom	4-17yrs	Foster carers: wider family or friends, parent(s), residential child care, somewhere else	X^2=22.454	4	875	<.001
Less chance to take part in hobbies	11-17yrs	Residential child care, somewhere else: foster carers	X^2=17.886	4	464	<.001
Liking school	11-17yrs	Foster carers: wider family or friends, residential child care	X^2=14.324	4	463	.006
Liking school	11-17yrs	Boys: girls	X^2=9.505	1	446	.002

Liking school	4-17yrs	Scotland: England/Wales	X^2=33.745	1	9717	<.001
Fear of bullying at school	8-11yrs	Girls: boys	X^2=12.824	1	238	<.001
Fear of bullying at school	11-17yrs	Girls: boys	X^2=27.711	1	464	<.001
Fear of bullying at school	8-11yrs	Scotland: England/Wales	X^2=4.461	1	3204	.035
Help from adult for fear of bullying	11-17yrs	Scotland: England/Wales	X^2=5.639	1	2076	.018
Worrying about feelings or behaviour	11-17yrs	Girls: boys	X^2=6.471	1	445	.011
Less happy with appearance	11-17yrs	Girls: boys	X^2=6.807	1	442	.009
Less happy with appearance	11-17yrs	Residential child care: foster carers	X^2=4.155	1	260	.042
Less happy with appearance	11-17yrs	Girls in residential child care: girls with wider family or friends	X^2=4.998	1	104	.025
Less happy with appearance	11-17yrs	Girls in residential child care: girls with parent(s)	X^2=4.038	1	52	.044
Low happiness yesterday	11-17yrs	Girls: boys	X^2=6.856	1	327	.009

Appendix 2. Factors associated with low overall wellbeing and very high overall wellbeing

Factors tested for association with low overall wellbeing

Indicator [Reference category]	Phi	p-value (exact)	Adjusted p-value	N	Reference category % with low wellbeing	Test category % with low wellbeing	Relative Risk	Lower	Upper
Is your life getting better? [No change/A bit/A lot better] A bit/A lot worse	0.467	<.001	<.001	460	11.1%	75.0%	6.77	4.87	9.40
How happy are you with the way you look? [5-10] 0-4	0.450	<.001	<.001	459	8.2%	51.2%	6.23	4.18	9.27
Do you ever worry about your feelings or behaviour? [Sometimes/Hardly ever/Never] All or most of the time	0.346	<.001	<.001	462	11.2%	49.2%	4.40	3.02	6.43
Do you feel listened to when decisions are made about your life? [All or most of the time/Sometimes] Hardly ever/Never	0.341	<.001	<.001	463	11.2%	50.0%	4.45	3.04	6.51
Do you trust the adults you live with? [All or most of the time/Sometimes] Hardly ever/Never	0.340	<.001	<.001	460	12.8%	63.3%	4.95	3.43	7.15
Do you feel safe in the home you live in now? [Always/Sometimes] Hardly ever/Never	0.323	<.001	<.001	462	14.3%	100.0%	6.97	5.57	8.73
Do you feel settled in the home you live in now? [Always/Sometimes] Hardly ever/Never	0.318	<.001	<.001	435	13.3%	68.2%	5.12	3.53	7.42
How often do you talk to the adults you live with about things that matter to you? [Most days/More than once a week] Less than once a week/Hardly ever	0.299	<.001	<.001	462	7.1%	29.4%	4.15	2.57	6.70

Do the adults you live with notice how you are feeling? [All or most of the time/Sometimes] Hardly ever/Never	0.288	<.001	<.001	461	11.9%	43.9%	3.69	2.48	5.48
How much do you like school, college or University? [A lot/A bit] Not at all/Not very much	0.232	<.001	<.001	460	9.7%	27.6%	2.84	1.85	4.35
How often do you get the chance to show you can be trusted? [All or most of the time/Sometimes] Hardly ever/Never	0.231	<.001	<.001	462	12.9%	40.0%	3.11	2.04	4.74
Do you get the chance to spend time on your own hobbies or activities? [All or most of the time/Sometimes] Hardly ever/Never	0.229	<.001	<.001	463	13.1%	41.9%	3.20	2.08	4.91
Do adults do things that make you feel embarrassed about being in care? [No] Yes	0.222	<.001	<.001	461	12.8%	36.5%	2.85	1.88	4.31
Do you see your Mum... [Just the right amount] [Too little/Too much]	0.206	0.001	0.014	283	8.1%	22.7%	2.81	1.53	5.17
Do you have an adult who you trust, who helps you and sticks by you no matter what? [Yes] No	0.195	0.000	0.004	461	13.4%	40.0%	2.99	1.86	4.79
In the past week, how often have you spent time outdoors in nature? [Every day/More than once this week] Once this week/Not at all	0.194	0.000	0.001	464	11.7%	27.9%	2.38	1.58	3.58
Do you get the chance to do similar things to your friends? [All or most of the time/Sometimes] Hardly ever/Never	0.161	0.001	0.015	461	12.9%	27.8%	2.15	1.40	3.28
Do you have a really good friend? [Yes] No	0.154	0.002	0.039	461	13.9%	34.2%	2.45	1.49	4.05
Do you trust the social worker you have now? [All or most of the time] Sometimes/Hardly ever/Never	0.152	0.003	0.041	412	13.7%	34.4%	1.95	1.27	3.00
Do you like your bedroom in the home you live in now? [Yes] No	0.144	0.004	0.055	464	14.4%	33.3%	2.32	1.41	3.83

Do you ever feel afraid of going to school, college or University because of bullying? [Sometimes/Hardly ever/Never] All or most of the time	0.143	0.007	0.085	459	13.1%	25.3%	2.74	1.53	4.91
Do the adults you live with show an interest in your education (what you are doing at school, college or University)? [All or most of the time/Sometimes] Hardly ever/Never	0.135	0.011	0.129	449	14.2%	38.9%	2.75	1.47	5.13
If you have brothers or sisters, do you see them... [Just the right amount] [Too little/Too much]	0.128	0.021	0.193	361	10.2%	19.2%	1.88	1.12	3.15
Do you see your Dad... [Just the right amount] [Too little/Too much]	0.123	0.135	0.811	157	12.5%	21.7%	1.74	0.85	3.54
How often do you get to practise life skills like cooking healthy food, washing clothes or using money? [All or most of the time/Sometimes] Hardly ever/Never	0.121	0.015	0.167	464	14.7%	31.4%	2.14	1.25	3.67
Is it easy to get in touch with your social worker? [All or most of the time/Sometimes] Hardly ever/Never	0.119	0.019	0.189	409	14.7%	27.0%	1.83	1.13	2.95
Gender [Boy] Girl	0.098	0.046	0.365	448	11.8%	18.8%	1.60	1.02	2.49
Do you know that you can ask to speak to your social worker on your own? [Yes] No	0.089	0.074	0.516	466	14.9%	26.2%	1.76	1.01	3.08
Has an adult explained why you are in care? [Yes,I know all I want to] No/Yes, but I'd like to know more	0.057	0.229	1.145	463	14.8%	19.8%	1.33	0.85	2.11
Can you connect to the Internet where you are living now? [Yes] No	0.052	0.343	0.685	464	15.5%	25.0%	1.61	0.73	3.54
Do you have a pet where you live? [Yes] No	0.050	0.300	1.200	464	14.5%	18.2%	1.26	0.83	1.91
How many social workers have you had in the last 12 months (since this time last year)? [One] None/Two/Three or more	0.012	0.801	0.801	467	15.4%	16.3%	1.06	0.70	1.61

Do you know who your social worker is now? [Yes] No	-0.056	0.306	0.918	465	16.6%	10.0%	0.60	0.25	1.42

Table 4. Factors tested for association with low overall wellbeing for 11-17 year-olds

Factors tested for association with very high overall wellbeing

Indicator [Reference category]	Phi	p-value (exact)	Adjusted p-value	n	Reference category % with low wellbeing	Test category % with low wellbeing	Relative risk	Lower	Upper
How happy are you with the way you look? [0-6] 7-10	0.473	0.000	0.000	459	15.1%	62.5%	4.14	2.92	5.86
Do you feel listened to when decisions are made about your life? [Sometimes/Hardly ever/Never] All or most of the time	0.358	0.000	0.000	463	25.6%	61.1%	2.38	1.88	3.03
Do the adults you live with notice how you are feeling? [Sometimes/Hardly ever/Never] All or most of the time	0.321	0.000	0.000	461	26.7%	58.5%	2.19	1.72	2.79
How often do you get the chance to show you can be trusted? [Sometimes/Hardly ever/Never] All or most of the time	0.290	0.000	0.000	462	27.2%	55.9%	2.06	1.61	2.63
How often do you talk to the adults you live with about things that matter to you? [Less than once a week/Hardly ever] Most days/More than once a week	0.279	0.000	0.000	462	25.6%	53.9%	2.11	1.61	2.77
Is your life getting better? [No change/A bit/A lot worse] A bit/A lot better	0.274	0.000	0.000	460	16.3%	49.4%	3.03	1.91	4.80
Do you trust the adults you live with? [Sometimes/Hardly ever/Never] All or most of the time	0.272	0.000	0.000	460	18.2%	49.7%	2.73	1.81	4.12

Do you feel settled in the home you live in now? [Sometimes/Hardly ever/Never] Always	0.262	0.000	0.000	465	23.6%	51.4%	2.17	1.60	2.96
Do you ever worry about your feelings or behaviour? [All or most of the time/Sometimes] Hardly ever/Never	0.234	0.000	0.000	462	33.7%	57.7%	1.71	1.40	2.11
Do the adults you live with show an interest in your education (what you are doing at school, college or University)? [Sometimes/Hardly ever/Never] All or most of the time	0.235	0.000	0.000	449	21.6%	49.3%	2.28	1.55	3.36
Do you feel safe in the home you live in now? [Sometimes/Hardly ever/Never] Always	0.223	0.000	0.000	462	17.6%	47.7%	2.71	1.64	4.49
How much do you like school, college or University? [A lot/A bit] Not at all/Not very much	0.213	0.000	0.000	460	27.6%	50.0%	1.81	1.37	2.40
How often do you get to practise life skills like cooking healthy food, washing clothes or using money? [Sometimes/Hardly ever/Never] All or most of the time	0.205	0.000	0.000	464	30.6%	51.1%	1.67	1.31	2.13
Do you get the chance to do similar things to your friends? [Sometimes/Hardly ever/Never] All or most of the time	0.183	0.000	0.002	461	34.2%	52.5%	1.53	1.24	1.90
Is it easy to get in touch with your social worker? [Sometimes/Hardly ever/Never] All or most of the time	0.189	0.000	0.004	409	31.6%	50.2%	1.59	1.24	2.03
Do you get the chance to spend time on your own hobbies or activities? [Sometimes/Hardly ever/Never] All or most of the time	0.170	0.000	0.005	463	31.9%	49.1%	1.54	1.21	1.97
In the past week, how often have you spent time outdoors in nature? [Every day/More than once this week] Once this week/Not at all	0.166	0.000	0.007	464	28.7%	47.4%	1.65	1.22	2.23
Do adults do things that make you feel embarrassed about being in care? [No] Yes	0.163	0.001	0.008	461	22.2%	45.7%	2.06	1.28	3.31
Do you trust the social worker you have now? [Sometimes/Hardly ever/Never] All or most of the time	0.164	0.001	0.027	412	30.8%	47.4%	1.54	1.18	2.01

Do you ever feel afraid of going to school, college or University because of bullying?									
[All or most of the time/Sometimes] Hardly ever/Never	0.142	0.003	0.039	459	29.3%	46.4%	1.58	1.14	2.19
Gender									
[Girl] Boy	0.117	0.017	0.215	448	37.1%	48.8%	1.31	1.05	1.64
Do you like your bedroom in the home you live in now?									
[No] Yes	0.102	0.041	0.490	464	25.6%	43.8%	1.71	0.99	2.94
Do you have a really good friend?									
[No] Yes	0.084	0.087	0.957	461	28.9%	44.0%	1.52	0.91	2.53
Do you know who your social worker is now?									
[No] Yes	-0.082	0.095	0.953	465	54.0%	41.0%	0.76	0.57	1.00
Do you have an adult who you trust, who helps you and sticks by you no matter what?									
[No] Yes	0.081	0.109	0.978	461	28.6%	43.7%	1.53	0.90	2.61
Can you connect to the Internet where you are living now?									
[No] Yes	0.076	0.112	0.896	464	25.0%	43.5%	1.74	0.81	3.74
Do you see your Dad...									
[Too little/Too much] Just the right amount	0.127	0.138	0.967	157	31.9%	44.3%	1.39	0.92	2.11
Has an adult explained why you are in care?									
[No/Yes, but I'd like to know more] Yes,I know all I want to	0.072	0.146	0.873	463	35.8%	44.3%	1.23	0.93	1.63
How many social workers have you had in the last 12 months (since this time last year)?									
[One] None/Two/Three or more	0.063	0.190	0.951	467	39.2%	45.4%	1.16	0.94	1.43
Do you see your Mum...									
[Too little/Too much] Just the right amount	0.077	0.206	0.823	283	36.1%	44.1%	1.22	0.90	1.67
Do you have a pet where you live?									
[No] Yes	0.031	0.563	1.690	464	40.3%	43.5%	1.08	0.86	1.34
If you have brothers or sisters, do you see them...									
[Too little/Too much] Just the right amount	0.016	0.830	1.661	361	42.3%	43.9%	1.04	0.82	1.32

Do you know that you can ask to speak to your social worker on your own?									
[No] Yes	-0.002	1.000	1.000	466	42.9%	42.5%	0.99	0.69	1.43

Table 5. Factors associated with very high overall wellbeing

Table 4 and Table 5 display the results from a series of univariate analyses aimed at understanding the association of low and very high wellbeing with each of the other aspects explored within the survey. Binary variables were derived from existing variables, and tested individually for association with the derived low and very high wellbeing variables.

The tables include the Phi value, which is a measure of the strength of an association between the two variables. The coefficient can range from -1 to 1, with a value of 0 indicating no association and values close to +1 or -1 respectively indicating a strong positive or negative association. Table 4 also displays the relative risk value for each variable. This shows the percentage in the reference category with low wellbeing divided by the percentage in the test category with low wellbeing for each variable. A relative risk value of 3 would allow us to say, for example, that children who felt that they did not get a chance to show they could be trusted were three times as likely to have low overall wellbeing as those who did feel they get a chance to show they can be trusted. The same approach is taken in Table 5.

The p-values for the Fisher's exact test have also been included within tables. The fact that we are exploring the relationship between low overall wellbeing and very high overall wellbeing and a wide range of other variables increases the likelihood that we will find an association between two of the variables by chance (rather than there being a true relationship present). This phenomenon is referred to as the multiple comparisons problem, and an overview of the problem and approaches to dealing with multiple comparisons is given by Chen et al. (2017).

As we increase the number of variables that we are assessing, it is therefore prudent to adjust for the fact that we are conducting multiple comparisons. The Bonferroni-Holm adjustment for multiple comparisons was applied to the p-values resulting from our univariate analyses in order to prevent an increase in the Type I error rate (that is, an increase in the chance of finding an effect when there is no effect present). These adjusted p-values are also presented in Table 4 and Table 5, and should be taken as a more reliable indication of a relationship than the unadjusted p-values.

General factors most strongly associated with low and very high overall wellbeing are shown in Table 6 and Table 7.

Factors most strongly associated with low overall wellbeing	Relative risk ratio	Phi value
Life getting a bit or a lot worse	6.8	0.467
Less happy with appearance	6.2	0.450
Worried about feelings or behaviour	4.4	0.346

Not listened to when decisions were made	4.5	0.341
Not trusting adults at home	5.0	0.340
Feeling less safe at home	7.0	0.323
Feeling less settled at home	5.1	0.318
Not talking regularly with adults at home about things that matter	4.2	0.299
Adults at home not noticing feelings	3.7	0.288

Table 6. Factors most strongly associated with low overall wellbeing

For older children (11-17yrs) in care, happiness with their appearance had the strongest association with low overall wellbeing, with just over half (51%) of care leavers who indicated they were not happy with how they looked having low wellbeing, compared to just 8% of care leavers who were more happy with how they looked. Those who were not happy with how they looked were therefore 6.3 times more likely to have low wellbeing than those who were happier with how they looked. This ratio is referred to as relative risk, and this is shown for each factor in Table 6 above.

Factors most strongly associated with very high overall wellbeing	Relative risk ratio	Phi value
Happiness with appearance	4.1	0.473
Listened to when decisions about life were made	2.4	0.358
Adults at home noticed feelings	2.2	0.321
Had the chance to show they could be trusted	2.1	0.290
Talked regularly with adults at home about things that matter	2.1	0.279
Felt that life was getting better	3.0	0.274
Trusted the adults at home	2.7	0.272
Always felt settled at home	2.2	0.262

Table 7. Factors most strongly associated with very high overall wellbeing

Table 7 shows factors most strongly associated with very high overall wellbeing. Again, happiness with appearance had the strongest association, with 63% of those who gave high scores having high overall wellbeing, compared to just 15% of those who were less happy with how they looked, a rate 4.1 times higher.

Understanding the collective influence of multiple factors on young people's wellbeing

While univariate analysis provides us with an understanding of the individual factors that are associated with low overall wellbeing, it can often be more informative to determine how these factors may combine and interact to collectively contribute towards the wellbeing of a child or young person. One common approach to exploring this is through the use of binary logistic regression models, such as those applied by Coram Voice (Selwyn & Briheim-Crookall, 2022) in their 10,000 Voices report. This report analysed Bright Spots findings across 38 local authorities in England between 2016 and 2021. By including multiple factors within one model, binary logistic regression can provide us with 'adjusted Odds Ratios', which offer a more measured estimate of the effect of each parameter in the model after accounting for the influence of the other factors. As such, these can be a more accurate representation of the influence of any given factor on wellbeing.

It was hoped that this analysis could be repeated with the data from Scotland's Bright Spots surveys, however upon assessment this was not deemed to be appropriate for the following two reasons:

1. Firstly, due to a far smaller sample size (n=474 young people, as opposed to n=3,897), it was decided that this more in-depth modelling would not be appropriate due to the high number of variables to be considered. A widely-used approach (Peduzzi et al, 1996) states that, to ensure robust analysis, there should be at least 10 instances of the event of interest (in our case, 10 individuals with low overall wellbeing) for each explanatory variable to be included in the model. As only 71 of the 474 in our sample were defined as having low overall wellbeing, this would limit the analysis to a maximum of 7 of the potential 33 explanatory variables. As our univariate analysis suggested that a far higher number of variables were strongly related to wellbeing, using a limited number of variables would serve to limit the usefulness of the approach; and
2. Secondly, there were several variables (such as whether a child felt content with the level of contact they had with their mother and/or siblings) that were found to be related to wellbeing (see Table 4 and Table 5), but that had high levels of missing data and would therefore serve to substantially reduce the sample size further if included.

For these reasons, the decision was taken to present findings based solely on the univariate analyses (as displayed within Tables 4 and 5).

About Bright Spots

To find out more about the Bright Spots Programme see: https://coramvoice.org.uk/bright-spots-programme/

About CELCIS

CELCIS is a leading improvement, innovation and research centre for children and young people's support, care and protection, based at the University of Strathclyde. We work with local, national and international partners to improve the lives of children, young people and families by strengthening the systems, services and practices that support them, helping to address their needs and realise their rights. Working alongside people and organisations responsible for their care and protection, we bring together evidence, lived experience and practical insight to facilitate and enable change, support the implementation of policy into practice, and drive meaningful and lasting improvement.

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